

sensitive/sexual harassment/civil action pending on Regional Counsel - possible bias.

U.S. Department of Justice

Central Office Administrative Remedy Appeal

Federal Bureau of Prisons

Transgender targeted victimization

see attachments

Type or use ball-point pen. If attachments are needed, submit four copies. One copy each of the completed BP-229(13) and BP-230(13), including any attachments must be submitted with this appeal.

From: South, Jason R. (Anna) 57903-019 5702 FCI Fort Dix
 LAST NAME, FIRST, MIDDLE INITIAL REG. NO. UNIT INSTITUTION

Part A - REASON FOR APPEAL

on I believe was 3-11-20 & 3-12-20 I was aggressively sexually harassed by to inmates in separate & unrelated incidents, one inmate only once on 3-11-20, the second inmate twice - once on 3-11-20 and again on 3-12-20. Both on 3-11 made sexually suggestive comments while grabbing their penis through their pants (which was erect). I told them both I am not interested in any sexual acts or in men at all & to get away from me & never do that again. I then reported it to staff which followed proper PREA policy. On 3-12-20, my cellie (who is now in SHU) who was one of the two on 3-11) waited on me to return to the cell after I told him I was to be directly returning & was masturbating while covered w/a sheet in bed lying down looking at me as I was to enter & told me come in when I asked what the Hell are you doing and then followed me down the hall, which I then alerted staff & reported.

DATE 3-16-20

SIGNATURE OF REQUESTER

Part B - RESPONSE

DATE

GENERAL COUNSEL

ORIGINAL RETURN TO INMATE

CASE NUMBER:

Part C - RECEIPT

CASE NUMBER:

Return to:

LAST NAME, FIRST, MIDDLE INITIAL

REG. NO.

UNIT

INSTITUTION

SUBJECT:

DATE

SIGNATURE OF RECIPIENT OF CENTRAL OFFICE APPEAL

USPLVN



PART C ON RECD IN M

BP-231(13)
JUNE 2002

Complaint
Court: Attachments not returned by
Central office. I have requested
but no reply.

Administrative Remedy No. 1021453-A1

Part B - Response

This is in response to your Administrative Remedy Appeal, wherein you allege transgender victimization based on your current housing assignment in a male unit/facility. You also note instances of sexual harassment; however, indicate staff thoroughly and appropriately reviewed and addressed your PREA related concerns. For relief, you request transfer to a female facility.

The Transgender Executive Council (TEC) reviewed you for transfer to a female facility. Based on Program Statement 5200.04, Transgender Offender Manual, several factors were considered to determine whether your current placement is appropriate, including your health and safety; your behavioral history, overall demeanor, and likely interactions with other inmates; whether placement would threaten the management and security of the institution and/or pose a risk to other inmates in the institution; and whether there has been significant progress towards transition as demonstrated by your medical and mental health history. After consideration and review, it was determined that your current designated facility is appropriate.

Furthermore, as indicated by your most recent laboratory results, your hormone levels have not been maximized or stabilized. Therefore, your medications were adjusted and hormone levels will continue to be monitored by Health Services staff at the institution.

Considering the foregoing, this response is provided for informational purposes only.

5/22/20
Date

TS
Ian Connors, Administrator
National Inmate Appeals *AKD*

**Bureau of Prisons
Health Services
Clinical Encounter - Administrative Note**

Inmate Name:	SOUTH, JASON ROBERT	Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M
Note Date:	06/08/2020 13:34	Race:	WHITE
		Facility:	FTD
		Unit:	H01
		Provider:	Sceusa, Carl MD/CCHP

Admin Note - General Administrative Note encounter performed at Health Services.

Administrative Notes:

ADMINISTRATIVE NOTE 1 Provider: Sceusa, Carl MD/CCHP

IM gave a list of requests to RN. Most of his requests will require a visit once Lockdown is lifted. He wants to change to Estrogen Patch but recently inc in Estradiol pills have not had full effect yet. He also wants to add progesterone while his Spironolactone not maximized yet.

The things that can be done is

Start Naprosyn and Dc Motrin

Renew his LB pass (He also wanted a single cell pass which cannot be accommodated at this time till visit with medical.

Note of interest for this patient on his sick call out completed in April was that we prescribe

*****Prophylactic medication for sexual encounter. He didn't mention this nor had this on his list of concerns in today's encounter.

Copay Required: No

Cosign Required: No

Telephone/Verbal Order: No

Completed by Sceusa, Carl MD/CCHP on 06/08/2020 13:37

**Bureau of Prisons
Health Services
Clinical Encounter - Administrative Note**

Inmate Name: SOUTH, JASON ROBERT	Sex: M	Reg #: 57903-019
Date of Birth: 09/11/1978	Race: WHITE	Facility: FTD
Note Date: 04/23/2020 10:42	Provider: Sceusa, Carl MD/CCHP	Unit: A02

Admin Note - Chart Review encounter performed at Health Services.

Administrative Notes:**ADMINISTRATIVE NOTE 1** Provider: Sceusa, Carl MD/CCHP

Recent Labs reveal very High Estrogen Level and Very Low Testosterone Level Will make medication adjustment

*(for a male, not for goal of a pre menopause woman)***New Medication Orders:**

Rx#	Medication	Order Date
	Estradiol Tablet	04/23/2020 10:42
	Prescriber Order: 2 mg Orally Mouth - daily x 180 day(s)	
	Indication: Gender Dysphoria In Adolescents And Adults	

Discontinued Medication Orders:

Rx#	Medication	Order Date
491452-FTD	Estradiol 2 MG Tab	04/23/2020 10:42
	Prescriber Order: Take three tablets (6 MG) by mouth each day	
	Discontinue Type: Immediate	
	Discontinue Reason: Order changed	
	Indication:	

New Laboratory Requests:

<u>Details</u>	<u>Frequency</u>	<u>Due Date</u>	<u>Priority</u>
Lab Tests-E-Estradiol	One Time	05/01/2020 00:00	Routine
Lab Tests-P-Prolactin			
Lab Tests-T-Testosterone, Free/Total			
Lab Tests-T-T4, Free			
Lab Tests-T-TSH			

Copay Required: No

Cosign Required: No

Telephone/Verbal Order: No

Completed by Sceusa, Carl MD/CCHP on 04/23/2020 10:55

*Incorrectly lowered
Dr. never treated
anyone trans gender*

**Bureau of Prisons
Health Services
Clinical Encounter - Administrative Note**

Inmate Name: SOUTH, JASON ROBERT	Sex: M Race: WHITE	Reg #: 57903-019
Date of Birth: 09/11/1978	Provider: Sceusa, Carl MD/CCHP	Facility: FTD
Note Date: 05/19/2020 12:05		Unit: H01

Cosign Note - Chart Review encounter performed at Health Services.

Administrative Notes:

ADMINISTRATIVE NOTE 1 Provider: Sceusa, Carl MD/CCHP

SIGNIFICANT ABN LABS FROM

Fixed day after episode

New Medication Orders:

Rx#	Medication	Order Date
	Estradiol Tablet	05/19/2020 12:05
	Prescriber Order: 2 mg Orally Mouth - daily x 180 day(s) - 3 tabs daily	
	Indication: Gender Dysphoria In Adolescents And Adults	

Discontinued Medication Orders:

Rx#	Medication	Order Date
493491-FTD	Estradiol 2 MG Tab	05/19/2020 12:05
	Prescriber Order: Take one tablet (2 MG) by mouth each day	
	Discontinue Type: Immediate	
	Discontinue Reason: new order written	
	Indication:	

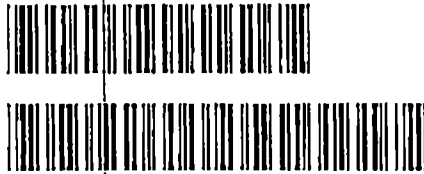
Copay Required: No

Cosign Required: No

Telephone/Verbal Order: No

Completed by Sceusa, Carl MD/CCHP on 05/19/2020 12:07

ROBERT WOOD JOHNSON
UNIVERSITY HOSPITAL
HAMILTON



Name: South, Jason R
Age: 41Y DOB: Sep 11, 1978
Gender: M Wt: 83.91 kg Ht: 182.88 cm
MedRec: 630553
AcctNum: 073270596
Attending: SPRO
Primary RN: GANY
Bed: ED RA 17

RWJ HAMILTON PROCEDURES AND TESTS

Reason for Exam: ATTEMPTED HANGING
EXAM CODE: 46100113

ACCESSION : 3713102

CTA NECK WITH CONTRAST

INDICATION: Attempted hanging

COMPARISON: None

TECHNIQUE: Axial CT images were obtained through the neck with coronal and sagittal reconstruction images acquired using the axial CT data with intravenous contrast. 3-D postprocessing was performed under the supervision of the radiologist.

Automatic exposure control was utilized.

FINDINGS:

The great vessel origins are patent.

The right common carotid artery is patent. The right carotid bifurcation and cervical right internal carotid artery are patent. There is 0% stenosis of the right carotid bifurcation by NASCET criteria. No evidence of dissection.

The left common carotid artery is patent. The left carotid bifurcation and cervical left internal carotid artery are patent. There is 0% stenosis of the left carotid bifurcation by NASCET criteria. No evidence of dissection.

The bilateral vertebral arteries are patent and unremarkable.

Parotid and submandibular glands are unremarkable. Thyroid gland is unremarkable. No abnormally enlarged lymph nodes in the neck. The airway is clear. Mild degenerative changes in the spine.

IMPRESSION:

Unremarkable carotid and vertebral arteries.

Workstation ID:RAI-HS-KALDERFE

Electronically Signed by: KAREN ALDERFER at 05/20/2020 07:31:15 PM

Signed by KAREN BARBARA ALDERFER at 05/20/2020 07:31:15 PM
<Ramsoft Platform>

ROBERT WOOD JOHNSON
UNIVERSITY HOSPITAL
HAMILTON



Name: South, Jason R
Age: 41Y DOB: Sep 11, 1978
Gender: M Wt: 83.91 kg Ht: 182.88 cm
MedRec: 630553
AcctNum: 073270596
Attending: SPRO
Primary RN: GANY
Bed: ED RA 17

RWJ HAMILTON DISCHARGE INSTRUCTIONS

FINAL DIAGNOSIS

Attempted self-asphyxiation

ADDITIONAL DIAGNOSIS

suicide attempt

TREATED BY:

Attending Physician – Sproule, MD, William

FOLLOWUP CONTACTS

AREA PHYSICIAN, OUT OF

Comment: YOU ARE RESPONSIBLE TO FOLLOW UP WITH YOUR PERSONAL PHYSICIAN.

Follow up with Primary Care Physician in 1 day

SPECIAL INSTRUCTIONS

Return if worse.

Follow up with primary care physician.

Take medication as prescribed.

Continue medications.

Please Note: As of March 1, 2015, Obstetrics & Maternity Services are no longer provided at RWJ Hamilton. For more information, visit us on the web at <http://info.rwjobgyn.org/>

Thank you for choosing Robert Wood Johnson University Hospital Hamilton. Our goal is to provide you with very good care, and we strive to do this for every patient. We use patient satisfaction surveys to listen to patients and families and welcome any of your comments about how we are doing to reach this goal. You may receive one in the mail. We hope that you'll complete it and let us know how we are doing.

NOTE: The examination and treatment you have received in the Emergency Department has been rendered on an emergency basis only, and is not intended to be a substitute for or an effort to replace your primary care physician. It is important that you let your doctor check you again and that you report any new or remaining problems at that time. It is impossible to recognize and treat all elements of injury or illness in a single Emergency Department visit. If you should become worse in any way do not hesitate to return to an Emergency Department or call us at (609)584-6666.

Along with your discharge instructions, we have included your vital signs while you were in the Emergency Department. This includes your blood pressure reading(s). If your blood pressure reading is over 120/80, you may have pre-hypertension or hypertension (high blood pressure). You should follow this up with your physician or clinic within one week to avoid any complications of elevated blood pressure.


If you were given a prescription for a medication that you have not previously taken, please be aware that some drugs can cause drowsiness. Please use caution when driving or operating machinery.

FCI Danbury #57903-019

Patient Name: SOUTH, JASON
Date of Birth: 9/11/1978

MRN: DH10053230
FIN: 0003168731

* Auth (Verified) *

STATE OF CONNECTICUT SEXUAL ASSAULT MEDICAL REPORT <small>(CJS 19a-112a) Revised June 2017</small>		 ECD 3168731 EMR 41Y M SOUTH, JASON DOB 09/11/1978 DOS 09/29/2019 MRN 10053230 PN 611728 Tenenbaum, Craig, MD
1. HEALTH CARE FACILITY: <u>Danbury Hospital</u>		PATIENT LABEL (If handwritten, record name, MR # and DOB.)
a. Date and Time of Patient Arrival: <u>09 24 14 2200</u> <small>Month Day Year Time</small>		
2. MEDICAL HISTORY AS RELATED BY PATIENT		
a. Chief Complaint: <u>Sexual assault</u>		
b. Date and Time of Assault: <u>09 25 19 1900</u> <small>Month Day Year Time</small>		
c. Summary of Assault: <u>Pt states he was in Bathroom Stall and they came in and punched him in face. States he woke up and they were having intercourse with him. States he tried to get away and they punched and kicked him again. States he had another Poreup LOC. States when woke up he was able to get away.</u>		
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 60%;"> Signature: <u>Victoria Hanen</u> <small>Print Name</small> <u>[Signature]</u> <small>Signature</small> </div> <div style="width: 35%; text-align: right;"> Date: <u>9/29/19</u> <small>Date</small> </div> </div>		
PATIENT FILE — (All White Copies) ENVELOPE ON KIT BOTTOM — (Yellow Copy of Page 1)		PAGE <u>1</u> OF <u>1</u> <small>CT100B-MEDREP-1.1 6/17</small>

FCI Danbury #57903-019

Patient Name: SOUTH, JASON

DOB: 9/11/1978 MRN: DH10053230

Computed TomographyAccession
CT-19-062156Exam Date/Time
9/26/2019 00:13 EDTExam
CT Brain/Head w/o ContrastOrdering Physician
Hasan, Syeda, DO**Reason for Exam**

(CT Brain/Head w/o Contrast) closed head injury with LOC

Report

CT SCAN OF THE HEAD WITHOUT CONTRAST:

HISTORY: 41 years Male closed head injury with LOC

TECHNIQUE: CT head performed using 5mm axial collimation Helical scanning was performed without contrast administration. Reformatted images in the coronal and sagittal plane were produced.

COMPARISON: None.

FINDINGS:

There is no depressed calvarial fracture.

There is fracture of the left orbit incompletely demonstrated on today's exam. Displaced fracture of the lateral wall the left orbit and disruption of the zygomaticomaxillary junction is noted. There is fracture of the mid zygomatic arch.

There is fracture of the posterior aspect lateral wall left maxillary sinus with a bone fragment located within the sinus contributing to stenosis of the pterygopalatine canal and possibly stenosis of the foramen rotundum.

Mastoid air cells are clear. Sphenoid sinuses clear. Ethmoid air cells are pneumatized as are the frontal sinuses.

There is no midline shift, mass effect, or intracranial hemorrhage. The ventricles are normal in size. Basal cisterns are preserved and the subarachnoid spaces are clear. No extra-axial collections are seen.

IMPRESSION:

No acute intracranial process including midline shift, mass effect or hemorrhage.

Fractures of the left orbit, left maxillary sinus, zygomaticomaxillary junction and zygomatic arch further detailed above

Thank you for allowing us to participate in the evaluation of this patient.

***** Final *****

Dictated by: Santoro, Joseph P, MD Danbury Radiological Associates, PC

Signed by: Santoro, Joseph P, MD Danbury Radiological Associates, PC

Signed (Electronic Signature): 09/26/2019 9:09 am

Practice: MD Danbury Radiological Associates, PC

**Bureau of Prisons
Health Services
Clinical Encounter**

Inmate Name: SOUTH, JASON ROBERT
Date of Birth: 09/11/1978
Encounter Date: 03/12/2020 10:11

Sex: M Race: WHITE
Provider: Elias, Vicente MLP

Reg #: 57903-019
Facility: FTD
Unit: A02

Injury Assessment - PREA evaluation encounter performed at Health Services.

SUBJECTIVE:

INJURY 1 Provider: Elias, Vicente MLP

Date of Injury: 03/11/2020 20:00 **Date Reported for Treatment:** 03/12/2020 10:10

Work Related: No **Work Assignment:** YARD EA AM

Pain Location:

Pain Scale: 0

Pain Qualities:

Where Did Injury Happen (Be specific as to location):

Patient denies trauma no injuries. He was ask to have sex with a inmate. He states he was not tpoch or injured.

Cause of Injury (Inmate's Statement of how injury occurred):

None

Symptoms (as reported by inmate):

Patient denies pain no trauma or injuries. He was ask by another I/M to have sex .

1. Injury assessment including history, the inmate's subjective complaint and exam. Done
2. Review the history of sexual activity and rape history. Yes
3. Inmate was not sent immediately to ER for a forensic exam :not clinically indicated.
4. Treatment for any injuries. No injuries
5. Inmate educated on options and availability for STD testing and prophylaxis/treatment. Yes, not indicated at this time.
6. Offered tests for HIV and other STDs, not clinically indicated.
7. Prophylactic treatment and schedule follow-up with Infectious Disease not indicated.
8. Schedule for follow-up medical treatment if clinically indicated. Not indicated.
9. Evaluation by mental health professional. Yes
10. Report is made to assure separation of the victim from his or her assailant. Operations LT was informed/notified.

OBJECTIVE:

Temperature:

<u>Date</u>	<u>Time</u>	<u>Fahrenheit</u>	<u>Celsius</u>	<u>Location</u>	<u>Provider</u>
03/12/2020	10:22 FTD	97.0	36.1	Oral	Elias, Vicente MLP

**Bureau of Prisons
Psychology Services******SENSITIVE BUT UNCLASSIFIED******Administrative Contact with an Inmate**

Inmate Name:	SOUTH, JASON ROBERT	Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M
		Facility:	FTD
Date:	06/12/2020 14:26	Unit Team:	UNIT 5702
		Provider:	Postorino, L. PsyD, Staff

Comments

During SHU rounds today, this writer was notified by an Associate Warden that IM South again asked for a cell change. This writer already addressed this issue with IM South earlier this week, as it was discovered that her cellmate has been attempting to return to his previous cell. This writer spoke to both inmates at the cell door. The cellmate became angry when informed that this writer would not assist him in returning to a cell with his friend. He indicated he did not want to cell with IM South. IM South expressed concern for the tension between the two of them. This writer indicated I will be attempting to place her with someone else in light of her cellmate's behavior. At that point, her cellmate returned to the door and apologized, insisting he is fine with being her cellmate and asking that no change be made. This writer pulled IM South from her cell and confirmed she has no safety concerns and is agreeable to remaining with her current cellmate. She agreed to notify staff immediately should this change.

IM South requested and was provided additional emotion tracking worksheets.

Completed by Postorino, L. PsyD, Staff Psychologist on 06/12/2020 15:08

**Bureau of Prisons
Psychology Services
SHU Review**

SENSITIVE BUT UNCLASSIFIED

Inmate Name:	SOUTH, JASON ROBERT	Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M
		Facility	FTD
Date:	06/12/2020 13:28	Provider:	Marantz, Stacie PsyD/Chief
Placed in SHU:	06/08/2020	Type:	SHU
Status:	ADMIN.DETENTION	Threat to Self:	Low
Basis of Review:	Inmate was interviewed	Adjustment:	Satisfactory, segregation not detrimental
Mental Status:	No significant mental health issues.	Threat to Others:	Low

Comments

SHU review was completed today by Dr. Postorino. IM SOUTH was monitored while she was in SHU. She denied the presence of any current mental health complaints. IM SOUTH denied suicidal ideation or intent, and she spoke with psychology services at this time. She appears to be adjusting adequately to segregation at this time. Will continue to be monitored during psychology SHU rounds. IM SOUTH came off of suicide watch earlier this week. She has been seen twice by psychology out of the cell. She has remained calm, even during difficult situations. She will be seen monthly or as needed and will work on her treatment plan with psychology staff.

Additionally, when asked, SHU Staff reported no concerns regarding her functioning or mental health.

Completed by Marantz, Stacie PsyD/Chief Psychologist on 06/18/2020 09:39

**Bureau of Prisons
Psychology Services
General Administrative Note**

****SENSITIVE BUT UNCLASSIFIED****

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M Facility: FTD	Unit Team: UNIT 5702
Date: 06/11/2020 14:39	Provider: Bell, A. Psy.D.	

Comments

During a recent audit it was determined that IM SOUTH was not on the Psych Advisory List, therefore she was added on this date. She was recently placed in SHU on 6/8/2020 and was seen that day to aid in her transition.

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current
Cannabis Use Disorder, Severe, F12.20*b - Current
Gender Dysphoria In Adolescents And Adults, F64.1 - Current
Posttraumatic Stress Disorder, F43.10 - Current
Borderline Personality Disorder, F60.3 - Current
Other Specified Personality Disorder, F60.89 - Current

Completed by Bell, A. Psy.D. on 06/11/2020 14:41

Bureau of Prisons
Psychology Services
Clinical Intervention - Clinical Contact

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M	Facility: FTD
Date: 06/10/2020 09:55	Provider: Postorino, L. PsyD, Staff	Unit Team: UNIT 5702

Focus of Session

IM South was seen today following an incident that took place yesterday evening (see Clinical Intervention dated 6-9-2020). This contact took place in a private office in the SHU.

This writer met with IM South to discuss two issues: one was regarding her request to be transferred to a female institution being denied, and the other was her attempt yesterday to switch cellmates. Per directive from the Chief Psychologist, IM South was advised that her transfer request was denied because her hormone levels are not where they need to be and because she was recently on suicide watch, indicating recent lack of mental stability. She was distressed when provided this feedback, stating that forgetting to take her medication for a week caused behavioral outbursts and led to being placed on suicide watch. She was encouraged to consider the positive aspect of this, as the cause of this incident was not out of her control, and she can therefore prevent it from happening again in the future. She was receptive. She was also discouraged from self-defeating thinking that will only hinder her progress.

Regarding the cellmate issue, IM South advised her cellmate appeared unhappy with being celled with her and wanted to cell with a friend instead. She indicated she submitted the copout request for a cell change in order to appease him and avoid conflict. She was counseled on this being an inappropriate way to handle this issue, particularly as she is aware that Psychology staff made efforts to select an appropriate cellmate for her. She verbalized understanding.

IM South asked to be able to shave while in SHU. She was reminded that Psychology is working with SHU staff to determine a way for her to safely shave her face in the presence of staff. During the conversation, she expressed surprise that she would only be allowed an electric razor in this case. She indicated feeling distressed by this, as not having a close shave is the same to her as having facial hair grown out (i.e., the hair is either present or it is not). She stated she had been given "clippers" while on suicide watch and this was inadequate for her needs. She explained that facial hair is a significant source of distress for her in terms of her gender dysphoria, particularly due to the increased likelihood of staff members misgendering her as a result. This writer advised that this department will continue working on a solution for this concern and will give her an update this week.

IM South also asked to have access to her property while in the SHU, including makeup. She acknowledged the limits on property while in the SHU for disciplinary rather than administrative reasons. She was advised this writer will get back to her on this matter. Lastly, IM South advised this writer that she has not been given her pill line medication since entering the SHU. This writer called the Pharmacy and was informed she will have it for evening pill line.

Subjective/Objective Presentation

IM South presented as alert and oriented to all spheres. Her mood was distressed with broad affect. Her speech was clear, coherent, and goal-directed, exhibiting normal rate and rhythm. Her thoughts were organized and lucid, with no apparent delusional content. Psychotic symptomatology was not reported or observed. She denied any suicidal/homicidal ideation or intent.

Intervention(s)

Supportive counseling was provided and established coping skills were reinforced. CBT interventions were used during this session including identifying thinking errors, identifying negative automatic thinking, and reframing negative thoughts.

This writer agreed to speak to the Chief Psychologist and Correctional Services staff about IM South's requests indicated above.

Progress/Plan

IM South is a CARE2-MH inmate. She will continue to be engaged in treatment activities related to her treatment plan on at least a monthly basis in accordance with CARE2-MH policy. Frequency may increase due to presenting problems, symptoms, and/or clinician's judgment. She was reminded of the ways to contact Psychology Services in the event of an emergency.

**Bureau of Prisons
Psychology Services**

SENSITIVE BUT UNCLASSIFIED

Clinical Intervention - Clinical Contact

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M	Facility: FTD
Date: 06/09/2020 17:30	Provider: Rodriguez, Jamie PsyD/Dap	Unit Team: UNIT 5702

Focus of Session

IM SOUTH was seen on this date while in the SHU at approximately 4:15 pm. The SHU OIC contacted this writer at approximately 4:05 pm and stated that they were concerned about IM SOUTH. She requested to see Psychology Services and when staff asked about safety, specifically suicidal ideation, she did not respond. Staff remained by her cell while this writer was contacted and she was pulled from her cell to wait for this writer. She was seen in a private office.

IM SOUTH showed this writer an Administrative Remedy response she just received that her hormone levels have not been maximized and she would not transfer to a female institution. She reported that she felt "betrayed" and "deceived" since this is what she has been working towards with Psychology Services and Medical. This writer was unaware of these discussions therefore could not contribute. Safety was assessed. IM SOUTH denied current or recent suicidal or homicidal ideation. She did acknowledge feelings of hopeless and helpless and stated, "I was getting scared." Again, asked about suicidal ideation, planning or intent. She stated, "I was scared I could get there but I didn't." A suicide risk assessment was not warranted at this time.

Subjective/Objective Presentation

IM SOUTH presented as alert and oriented in all spheres. IM SOUTH's mood appeared euthymic and affect was congruent. IM SOUTH maintained appropriate eye contact and her rate and tone of speech were within normal limits. There was no evidence of thought or perceptual disturbances at this time.

Intervention(s)

Supportive counseling was offered. IM SOUTH utilized her safety plan and stated that once she experienced the sensation of panic she laid down and practiced deep breathing, she utilized an RSA, and she also requested that the officer call for Psychology Services. She was positively reinforced for implementing these strategies. She discussed how much progress she has made recently and how scared she was following her last suicide attempt. She also discussed her hope for transfer to a female institution.

IM SOUTH requested that this writer take the copy of the administrative remedy. She did not want it in her belongings offering concern that it may trigger her or cause her upset. She was advised that this writer would put it in a folder for safe keeping with intent to return to her. She was agreeable.

Progress/Plan

IM SOUTH will continue to be monitored during SHU rounds. She is aware of how to request Psychology Services on an emergent or routine basis. Pharmacy was contacted with regard to complaints that she has not received certain medications. The Chief Psychologist was notified of the administrative remedy response she was provided on this date so that IM SOUTH may be given more clarity on the circumstance or her understanding of pending transfer.

Completed by Rodriguez, Jamie PsyD/Dap Coord on 06/09/2020 18:28

**Bureau of Prisons
Psychology Services**

SENSITIVE BUT UNCLASSIFIED

Clinical Intervention - Clinical Contact

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M	Unit Team: UNIT 5702
Date: 06/08/2020 13:43	Facility: FTD	
	Provider: Houseman, J. PsyD	

Focus of Session

Met with IM SOUTH in SHU to help facilitate her transition from suicide watch to SHU. She reported feeling anxious because her cell situation was not settled before she arrived in the SHU. She was able to engage her coping skills and used good communication skills with this writer. She was given all of her written materials (coping cards etc.) as well as a play away to help manage her anxiety. She was appreciative of these things being done for her. She engaged in a discussion of which coping skills work best for her and indicated that the actual act of taking the cards out a reviewing them are the most effective. She also indicated that breathing techniques are very helpful for her.

Subjective/Objective Presentation

IM SOUTH presented as alert and oriented in all spheres. IM 's mood appeared anxious and affect was congruent with her mood. IM SOUTH maintained appropriate eye contact and her rate and tone of speech were within normal limits. There was no evidence of thought or perceptual disturbances at this time. She denied suicidal ideations, plans or intentions.

She was given a play away to listen to, to help manager her anxiety. See attached rental agreement.

Intervention(s)

Supportive counseling was offered. IM SOUTH utilized her safety plan and stated that once she experienced the sensation of panic she laid down and practiced deep breathing, she utilized an RSA. When she received her written materials, she immediately began to review them. Her mood appeared to improve over the course of this interaction.

Progress/Plan

IM SOUTH will continue to be monitored during SHU rounds. She is aware of how to request Psychology Services on an emergent or routine basis.

Diagnosis:

Posttraumatic Stress Disorder, F43.10 - Current

Borderline Personality Disorder, F60.3 - Current

Other Specified Personality Disorder, F60.89 - Current

Completed by Houseman, J. PsyD on 06/10/2020 13:34

**Bureau of Prisons
Psychology Services
Safety Plan**

****SENSITIVE BUT UNCLASSIFIED****

Inmate Name:	SOUTH, JASON ROBERT	Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M
		Facility:	FTD
Date:	06/08/2020 13:28	Provider:	Bell, A. Psy.D.
		Unit Team:	UNIT 5702

Warning Signs

See Attached

Coping Strategies

See Attached

Social Contacts

See Attached

Contacting Staff

See Attached

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current

Cannabis Use Disorder, Severe, F12.20*b - Current

Gender Dysphoria In Adolescents And Adults, F64.1 - Current

Posttraumatic Stress Disorder, F43.10 - Current

Borderline Personality Disorder, F60.3 - Current

Other Specified Personality Disorder, F60.89 - Current

Completed by Bell, A. Psy.D. on 06/08/2020 13:30

**Bureau of Prisons
Psychology Services
Post Suicide Watch Report**

****SENSITIVE BUT UNCLASSIFIED****

Inmate Name: SOUTH, JASON ROBERT	Sex: M	Facility: FTD	Reg #: 57903-019
Date of Birth: 09/11/1978	Provider: Bell, A. Psy.D.		Unit Team: UNIT
Date: 06/08/2020 12:28			

Watch Start Date: 05/18/2020 15:00	Watch Stop Date: 06/08/2020 09:15
Total Time on Watch: 498 hrs 15 minutes	
Watch Conducted By: Staff	Transferred to Medical Center: No

Current Mental Status

Level of Consciousness: Alert and Oriented

Psychomotor Activity: Normal

General Appearance: Neat/well groomed

Behavior: Cooperative

Mood: Appropriate to Content

Thought Process: Goal Directed

Thought Content: Normal

Risk Factors Assessed:

This writer screened the inmate for a variety of empirically validated factors commonly associated with risk for self harm.

The following **STATIC** risk factors were assessed to be present and increase the inmate's risk for engaging in suicide related behaviors: History of childhood abuse (physical or sexual), History of inpatient psychiatric treatment, History of mental illness, History of self-injury or suicide attempt, History of violent behavior

The following **DYNAMIC** risk factors were assessed to be present and increase the inmate's risk for engaging in suicide related behaviors: Fear for own safety, Sleep problems

The following **PROTECTIVE** factors were assessed to be present and may decrease the inmate's risk of suicide: Able to identify reasons to live, Adequate problem solving skills, Denial of suicidal ideation/intention/plans, Future orientation, Social support in the institution, Supportive family relationships, View of death as negative, Willingness to engage in treatment

Regarding static risk factors, IM SOUTH has a history of suicide, mental illness, inpatient hospitalization, childhood abuse, and a violent history.

Regarding dynamic risk factors for suicide, IM SOUTH has reported sleep difficulties while on suicide watch to include nightmares, excessive sweating, and difficulty falling asleep.

Regarding protective factors against suicide, IM SOUTH has engaged in treatment while on suicide watch and can reported several reasons to live. She reports having perceived social supports within and outside the institution, as well as several coping skills that she can use on her own. She has consistently denied suicidal ideation, intention, or plans for nearly two weeks and reports future orientation. She is also willing to continue to engage in treatment and take her medications as prescribed.

Reason for Referral

The following is taken from the SRA dated 5/18/20:

IM SOUTH was referred to psychology on 05/18/20 at approximately 2:30pm by her housing unit manager. The unit manager requested that this writer present to the housing unit as IM SOUTH was "acting out." This writer presented to the unit immediately and located IM SOUTH in her room with the unit manager and unit team staff. IM SOUTH reported feeling frustrated and the unit manager reported that IM SOUTH was "throwing a fit" and that she needed to get out of the unit. At that time, compound officers, SIS Lt, and Operations Lt arrived to the unit and escorted her from the unit. On the way out of the unit, IM SOUTH requested that she be able to fill her water bottle with water, which was denied. She proceeded to throw her water bottle on the ground, which landed near the compound officer who was opening the unit door at that time. IM SOUTH was escorted to the Lts complex. While being escorted, this writer spoke with unit team staff who reported that IM SOUTH appeared to have a disagreement with another inmate and then became verbally aggressive. Unit team staff reported that she was using the "n" word and shouting and slamming doors while she walked from the unit team area to her room. Unit team staff reported concern for IM SOUTH's safety as several inmates in the

Inmate Name:	SOUTH, JASON ROBERT			Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M	Facility:	FTD
Date:	06/08/2020 12:28	Provider:	Bell, A. Psy.D.	Unit Team:	UNIT

housing unit were upset by her reported use of racial slurs. This writer was then called to the Lts complex to speak with IM SOUTH.

Changes in Risk Factors Assessed

IM SOUTH was placed on suicide watch on 5/18/20 after she made a statement about wanting to kill herself and then attempting to do so by attempting to stab her leg with a mechanical pencil. She was placed on suicide watch and then made several more reported suicide attempts to include rubbing her wrist on an exposed metal wire, rubbing her arm on the corner of the cement block, banging her head on the cement walls, attempting to wrap the suicide watch blanket around her neck, and wrapping a seatbelt around her neck. These attempts all occurred between 5/18/20 and 5/21/20. After her final attempt was made in van on the way back from an outside hospital, IM SOUTH has consistently denied suicidal ideation, intention, or plans. She noted that her final attempt was "scary" and that she realized the lethality of her attempts. She not only reported this, but also demonstrated distress tolerance with several stressors while on watch. This is noted because IM SOUTH has a cycle of suicide to include suicidal ideation and attempts when unable to manage distressing thoughts, emotions, and external situations.

IM SOUTH reported several reasons to live to include her family, her gender transition, her desire for mental health treatment, her anticipated release from prison, and her plans for her future outside of prison. While on suicide watch she developed coping cards which listed her reasons to live as a daily reminder. See attached. IM SOUTH also presents as future orientated and has hope for her future. This is seen in her coping cards as she lists several goals and plans for her future. Some of which she acknowledges are lofty and others that are simple and easily attainable. These goals give her hope and meaning in her life. IM SOUTH not only has future orientation for her life outside of prison but also while in prison. She reported wanting to focus on her gender transition and her goals to appropriately participate in her medical and psychological treatment. She continues to report excitement about living as a female and her desire to transfer to a female institution. Along with this comes her desire to advocate for other transgender women, which is one of her reasons to live. IM SOUTH's behavior also supports her future orientation to include her completing self help materials and homework assignments, requesting and taking showers, engaging in daily hygiene (brushing teeth, cleaning cell, washing face, shaving), talking with suicide watch officers, eating her meals, taking medications as prescribed, consulting with medical regarding health questions, and asking questions about self-help materials to ensure understanding. She completed RSAs on several events that occurred while on suicide watch and reviewed several self-help materials on mindfulness, appropriate boundaries, control, distress tolerance, and specific DBT skills. She reported utilizing these skills and achieving positive results. This shows her willingness to engage in treatment and her ability to problem solve in difficult moments. IM SOUTH has been able to identify her family and friends in the community who she receives support from and also those she receives support from within the institution.

She has continued to report difficulties with nightmares, excessive sweating, and difficult falling asleep throughout her time on suicide watch. She has learned and utilized grounding techniques that she noted have been effective in decreasing the amount of nightmares and her ability to tolerate the related distress. IM SOUTH reported some fear about her safety due to her placement in SHU and her inability to control who she is housed with. She noted that the last time she was in SHU it was after she was assaulted at another institution. She discussed these concerns during suicide watch contacts and discussed ways to cope with this fear and focus on the control that she did have in the situation. This writer reminded IM SOUTH that the safety of all inmates was a number one priority for this institution.

Reason for Removal from Watch

After consulting with the Chief Psychologist and Psychology Staff, it is recommended inmate SOUTH be removed from suicide watch. As stated previously, inmate SOUTH has denied suicidal and/or self harming ideation, intent, or plan and presents with several protective factors against suicide. She presents with future orientation, reports several reasons to live, has participated in psychological interventions while on suicide watch, and expressed a willingness to participate in treatment with Psychology Services in the future. Inmate SOUTH will be released to SHU.

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current
 Cannabis Use Disorder, Severe, F12.20*b - Current
 Gender Dysphoria In Adolescents And Adults, F64.1 - Current
 Posttraumatic Stress Disorder, F43.10 - Current

**Bureau of Prisons
Psychology Services
Suicide Watch Contact**

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT	Sex: M	Facility: FTD	Reg #: 57903-019
Date of Birth: 09/11/1978	Provider: Gomez, D. PsyD, NR DAPC		Unit Team: UNIT 5702
Date: 06/07/2020 08:46			

Observations

Inmate South was seen due to her continued placement under suicide watch on this date. A review of the log books show that she continues to eat all meals, rest, and work on her coping cards. She was alert and fully oriented throughout our conversation. She described herself as, "much better." She explained, "I didn't have a single night sweat or night terror last night. This is the first night since I've been on watch. I actually had dreams last night. I slept for over 8 hours and feel so good today."

Inmate South repeatedly denied suicidal ideation, intention, or planning. She described herself as hopeful. She stated, "I'm hopeful that I can put this whole thing past me." She demonstrated future orientation by asking about the possibility of receiving a shower tomorrow prior to meeting with the UDC and going to SHU. She stated, "they only shower three times a-week. I'd hate to get up there and have to another three days to shower."

Recommendations

Suicide watch will continue and she will be monitored daily.

Completed by Gomez, D. PsyD, NR DAPC on 06/08/2020 06:30

**Bureau of Prisons
Psychology Services
Suicide Watch Contact**

****SENSITIVE BUT UNCLASSIFIED****

Inmate Name:	SOUTH, JASON ROBERT	Sex:	M	Facility:	FTD	Reg #:	57903-019	
Date of Birth:	09/11/1978	Provider:	Gomez, D. PsyD, NR DAPC	Unit Team:	UNIT 5702			
Date:	06/06/2020 08:33							

Observations

Inmate South was seen for her daily contact this morning. She was seen at cell front. Prior to his interaction, this writer reviewed the log books. Inmate South appears to eat all meals, write coping cards, listen to her playaway, and spends significant time resting.

Inmate South was alert and fully oriented with euthymic mood and affect. She was interpersonally friendly. She repeatedly denied any experience of self injurious thoughts. She stated, "I'm actually feeling really good about the plan for releasing on Monday." She then discussed the plan at length and repeatedly expressed appreciation for the efforts of Dr. Bell and Dr. Marantz in this. She stated, "I mean, it's not a good thing that I'm going to the SHU or that I have to have a cellie. But they made this happen in a way that's best for me and I get that."

Recommendations

Suicide watch will continue and she will be monitored daily.

Completed by Gomez, D. PsyD, NR DAPC on 06/06/2020 08:38

**Bureau of Prisons
Psychology Services
Suicide Watch Contact**

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT	Reg #: 57903-019
Date of Birth: 09/11/1978	Unit Team: UNIT 5702
Sex: M	Facility: FTD
Date: 06/05/2020 13:05	Provider: Bell, A. Psy.D.

Observations

Inmate SOUTH was seen on this date for her daily suicide watch contact. She was placed on suicide watch on 5/18/2020 after she endorsed suicidal ideation, intention, and plans and engaged in self-described suicide attempts. A review of the log books indicated that she has been sleeping, eating, engaging in conversation with the suicide watch officer, and reading/working on self help materials. Upon arriving to the suicide watch cell, inmate was laying in bed but presented at cell front to speak with this writer.

Inmate appeared alert and oriented. She reported her mood as "good" and her affect matched. Her rate and tone of speech were within normal limits. She denied any experience of psychotic symptoms and no delusional thinking or hallucinatory experiences were overtly evident in her presentation. She indicated that she did have a few nightmares last night but that she also had some positive dreams and slept relatively well. She denied current suicidal ideation, intention, or plans.

Per recommendations in the SRA completed 5/18/2020, this author and inmate SOUTH discussed reasons to live and distress tolerance coping skills. In order to continue to reinforce her safe behavior and aid in her transition to SHU, IM SOUTH was pulled from her cell for this contact and met with this writer in a private office in the Psychology Department. She was provided boxers and sneakers to wear during this time. During this contact she reported that she continued to feel relief after reporting her PREA allegation yesterday. She discussed her plan to transfer to SHU on Monday with this writer throughout this session. This writer informed her of the logistics of SHU to include the rate of opportunity for a shower and she placement with cellmate. This writer explained the reasoning behind having a cellmate and IM SOUTH reported understanding of this. She processed her concerns and what she could do if she feels concern for her safety, which is her biggest concern. She was relieved to learn of the distress alarm that exists in the SHU cells in this institution. This writer processed the various coping skills that she can do and how she can reach Psychology. This writer informed her that her request to a female institution is still being consider but that there is no further information at this time. This writer acknowledged the discomfort with "not knowing" but reminded her of the positives to include the fact that she has not been denied. This writer discussed the steps that she needs to continue to take to include medication compliance, mental and emotional stability, and cooperation with her treatment and provider recommendations. She agree that this was important to continue as well and noted her acceptance of the "limbo" phase that she is in regarding this transfer.

In order to facilitate a proper transition of therapeutic care, this writer called the Psychologists covering SHU and put them on speaker phone with IM SOUTH. It should be noted that due to the current COVID-19 crisis, this writer cannot continue to provide therapeutic services. IM SOUTH asked a few questions of the new providers and reporting feeling good after talking with them. She indicated that she has met them before and believes they will work well together. IM SOUTH requested that this writer help write a coping card for her to include the things that this writer has helped her work on during her stay at FTD. This writer deemed this an appropriate request for a termination and engaged with IM SOUTH in creating this coping card. She noted that she also made some for other supportive individuals that she has met at this institution. During this activity, IM SOUTH became tearful and reported that she is appreciative of the help that this writer gave in order to her to help herself. She indicated that while she is not happy about the events that led to her suicide watch placement and the attempts she made after her placement, but that she does believe she has grown significantly in her therapeutic process. She noted that while listening to her Playaway on mindfulness she had an 'ah ha' moment in which she truly felt in control of her thoughts and feelings for the "first time in a long time." She expressed joy in having this experience and excitement in her ability to utilize this control in being mindful with her thoughts and activities. This writer provided verbal feedback that she does appear to have made significant progress.

Recommendations

Suicide watch will continue and she will be monitored daily. She was provided boxer briefs. Pending continued safe behavior, IM SOUTH will be transferred to SHU on Monday,

Inmate Name: SOUTH, JASON ROBERT

Date of Birth: 09/11/1978

Sex: M

Facility: FTD

Reg #: 57903-019

Unit Team: UNIT 5702

Date: 06/05/2020 13:05

Provider: Bell, A. Psy.D.

Diagnosis:

Agoraphobia, F40.00 - Resolved

Alcohol Use Disorder: Severe, F10.20*b - Current

Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Resolved

Cannabis Use Disorder, Severe, F12.20*b - Current

Gender Dysphoria In Adolescents And Adults, F64.1 - Current

Major Depressive Disorder: Single Episode: Mild, F32.0 - Resolved

Panic Disorder, F41.0*b - Resolved

Posttraumatic Stress Disorder, F43.10 - Current

Unspecified Anxiety Disorder, F41.9 - Resolved

Unspecified Depressive Disorder, F32.9*b - Resolved

Antisocial Personality Disorder, F60.2*b - Resolved

Borderline Personality Disorder, F60.3 - Current

Other Specified Personality Disorder, F60.89 - Current

Unspecified Personality Disorder, F60.9 - Resolved

Completed by Bell, A. Psy.D. on 06/05/2020 13:29

**Bureau of Prisons
Psychology Services
Suicide Watch Contact**

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M	Facility: FTD
Date: 06/04/2020 13:17	Provider: Bell, A. Psy.D.	Unit Team: UNIT 5702

Observations

Inmate SOUTH was seen on this date for her daily suicide watch contact. She was placed on suicide watch on 5/18/2020 after she endorsed suicidal ideation, intention, and plans and engaged in self-described suicide attempts. A review of the log books indicated that she has been sleeping, eating, engaging in conversation with the suicide watch officer, and reading/working on self help materials. While in the suicide watch area the Chaplin came by to check in with IM SOUTH as well. He provided this writer with materials that he believed may be helpful for IM SOUTH after speaking with her the other day. Upon arriving to the suicide watch cell, inmate was laying in bed but presented at cell front to speak with this writer.

Inmate appeared alert and oriented. She reported her mood as "okay" and her affect matched. Her rate and tone of speech were within normal limits. She denied any experience of psychotic symptoms and no delusional thinking or hallucinatory experiences were overtly evident in her presentation. She did report experiencing illusions after waking from a nightmare last night. She denied current suicidal ideation, intention, or plans but noted distress related to her stressors from the day before. She reported pride in not having suicidal ideation in response to her stress.

Per recommendations in the SRA completed 5/18/2020, this author and inmate SOUTH discussed reasons to live and distress tolerance coping skills. In order to continue to reinforce her safe behavior and aid in her transition to SHU, IM SOUTH was pulled from her cell for this contact and met with this writer in a private office in the Psychology Department. She was provided boxers and sneakers to wear during this time. During this contact she reported having had a difficult night last night. She reported having an upsetting conversation with a health services staff regarding her transition process that left her feeling "insulted, shitty" and also noted that she felt like her "femininity and womanhood" were being questioned. She noted that she appropriately handled this situation by utilizing her coping skills of distraction. She noted that she also read her incident reports last night which were upsetting as she did not recall all of the events noted in the reports. In addition, she had several nightmares to include "shu cellie assaulting... running red lights and crashing... trying to hug people and they refuse." She noted that this combination of stressors led her to have an increase in rumination, suspicious ideation, illusions of the walls moving, nausea, and excessive sweating. She noted that she looked at her coping cards but could not focus on the content in the moment, but picked them up later. She noted that she did utilize the playaway to try to drown out her thoughts and help her relax and go back to sleep. She also noted that she tried to stay still and acknowledge her feelings. She noted that she did this by writing down her thoughts on a sheet of paper. Once she reportedly calmed down she was able to utilize RSAs to challenge her thinking. This writer provided positive verbal feedback of her use of coping skills to include not acting impulsively, looking at her coping cards, listening to music/playaway, writing down her thoughts, and use of rational thinking exercises. She continued to present rationally during this session. IM SOUTH reported having pride in her ability to cope without suicidal ideation but noted concern about these symptoms. At the end of this session, IM SOUTH showed this writer a piece of paper that she had been reading off of during the session, which she reportedly wrote last night. The paper stated the following "there was way more sexual harr/assaults here than I told on." She also wrote on this sheet of paper, "STD test please...denied prophylaxis...I just want to leave F.D. right now!...I don't feel safe here it's to corrupt." This writer initiated an SAI-V immediately and IM SOUTH was placed back in her cell. It should be noted that IM SOUTH requested that this writer act as her advocate and be present during her evaluations with SIS and Medical. This writer did so and checked in with IM SOUTH after this was complete. At that time she reported that she felt some relief in reporting the information and noted that she wanted to continue to work on her goals but that she did not want to talk further about the event at this time.

Recommendations

Suicide watch will continue and she will be monitored daily.

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current

Cannabis Use Disorder, Severe, F12.20*b - Current

Inmate Name:	SOUTH, JASON ROBERT	Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M
		Facility:	FTD
Date:	06/04/2020 13:17	Provider:	Bell, A. Psy.D.
		Unit Team:	UNIT 5702

Gender Dysphoria In Adolescents And Adults, F64.1 - Current

Posttraumatic Stress Disorder, F43.10 - Current

Borderline Personality Disorder, F60.3 - Current

Other Specified Personality Disorder, F60.89 - Current

Completed by Bell, A. Psy.D. on 06/05/2020 09:08

**Bureau of Prisons
Psychology Services
Suicide Watch Contact**

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M	Facility: FTD
Date: 06/03/2020 13:55	Provider: Bell, A. Psy.D.	Unit Team: UNIT 5702

Observations

Inmate SOUTH was seen on this date for her daily suicide watch contact. She was placed on suicide watch on 5/18/2020 after she endorsed suicidal ideation, intention, and plans and engaged in self-described suicide attempts. A review of the log books indicated that she has been sleeping, eating, engaging in conversation with the suicide watch officer, and reading/working on self help materials. Upon arriving to the suicide watch cell, inmate was laying in bed but presented at cell front to speak with this writer.

Inmate appeared alert and oriented. She reported her mood as "good" and her affect matched. Her rate and tone of speech were within normal limits. She denied any experience of psychotic symptoms and no delusional thinking or hallucinatory experiences were overtly evident in her presentation. She denied current suicidal ideation, intention, or plans. She continued to report disrupted sleep but noted and overall decrease in her nightmares.

Per recommendations in the SRA completed 5/18/2020, this author and inmate SOUTH discussed reasons to live and distress tolerance coping skills. Specifically IM SOUTH reported continued development of her coping cards and coping skills. She participated in a contact with another provider yesterday in which she appropriately shared her coping cards. She also practiced succinctly presenting her concerns as she is preparing for her transfer to SHU and will not have daily sessions with Psychology during her placement. During today's contact this writer reported their intention to pull her from her cell for contacts on the following two days to reinforce her positive behavior and simulate the process she will occur in SHU. This writer noted that tomorrow's contact will consist of a role play activity to practice her communication and distress tolerance for possible situations that may occur in SHU. IM SOUTH appeared to experience some distress in thinking about possible negative situations but reported overall understanding of the exercise and a desire to prepare herself and to feel in control in distressing moments. She continued to express and process concern related to her placement in SHU to include the steps following SHU and the logics of her placement. This writer indicated that Psychology staff continues to consult with other departments in preparation for her transfer.

Comments

IM SOUTH has not engaged in suicidal behavior and has not attempted suicide since 5/20/2020. She reported fleeting suicidal ideation at one point since that date but has consistently denied suicidal ideation since that time. She noted that her attempt on 5/20/20 actually "scared her" and that is fueling her desire to engage in treatment and change her cycle of suicide. She has demonstrated with desire by engaging in sessions, completing homework assignments, displaying safe behavior with more items in her cell, and building her coping skills. Her acute risk for suicide appears to have decreased at this time based on her dynamic risk factors and increase of protective factors. She continues to have several static factors. Additionally, she will likely have an increase in stressors once she is placed in SHU which is why this writer, along with other departments, is working on a specific plan for her transition to SHU.

Recommendations

Suicide watch will continue and she will be monitored daily.

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current
 Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current
 Cannabis Use Disorder, Severe, F12.20*b - Current
 Gender Dysphoria In Adolescents And Adults, F64.1 - Current
 Posttraumatic Stress Disorder, F43.10 - Current
 Borderline Personality Disorder, F60.3 - Current
 Other Specified Personality Disorder, F60.89 - Current

Inmate Name:	SOUTH, JASON ROBERT	Sex:	M	Facility:	FTD	Reg #:	57903-019
Date of Birth:	09/11/1978	Provider:	Bell, A. Psy.D.	Unit Team:	UNIT 5702		
Date:	06/03/2020 13:55						

Completed by Bell, A. Psy.D. on 06/04/2020 08:13

**Bureau of Prisons
Psychology Services
Suicide Watch Contact**

****SENSITIVE BUT UNCLASSIFIED****

Inmate Name: SOUTH, JASON ROBERT	Sex: M	Facility: FTD	Reg #: 57903-019
Date of Birth: 09/11/1978	Provider: Gomez, D. PsyD, NR DAPC		Unit Team: UNIT 5702
Date: 06/02/2020 07:58			

Observations

Inmate South was seen by this writer for her daily contact while under suicide watch precautions. Prior to meeting with the inmate this writer reviewed the log books. Inmate South appears to have eaten all meals and taken medication as prescribed in the last 24 hours.

Inmate South was alert and fully oriented throughout this interaction. She was interpersonally friendly with cheerful mood and affect. She was provided with a playaway and headphones. She responded, "thanks, I find these helpful." She denied any form of distress or suicidal thinking. She stated, "I've been working on my coping cards."

This writer reviewed those cards with her. Inmate South completed approximately 12 cards with coping skills for different situations. For example, one card read; "when I need a smile" at the top and listed 17 memories that make her smile. She explained, "when I get bogged down and think about how everything goes wrong for me, I should look at this card. I'll keep it in my pocket when watch is over." Another card had listed her reasons to live. She discussed that card at length with this writer.

She was reinforced for her efforts in developing these skills. We also discussed a potential disruption to her plans this morning following a national lock down due to civil unrest. Inmate South requested a shower yesterday and was unable to receive one. Today, it is unclear if she will receive one as the compound officers are busy coordinating meal deliveries to the units. We discussed using her coping skills in the event that she does not get her shower. She agreed to do so.

Comments

Inmate South was provided a shower shortly after this interaction.

Recommendations

Suicide watch will continue and he will be monitored daily.

Completed by Gomez, D. PsyD, NR DAPC on 06/02/2020 11:34

**Bureau of Prisons
Psychology Services
Suicide Watch Contact**

****SENSITIVE BUT UNCLASSIFIED****

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M	Unit Team: UNIT 5702
Date: 06/01/2020 13:35	Facility: FTD	
	Provider: Bell, A. Psy.D.	

Observations

Inmate SOUTH was seen on this date for her daily suicide watch contact. She was placed on suicide watch on 5/18/2020 after she endorsed suicidal ideation, intention, and plans and engaged in self-described suicide attempts. A review of the log books indicated that she has been sleeping, eating, engaging in conversation with the suicide watch officer, and reading/working on self help materials. IM SOUTH was pulled from her cell this morning to shave her face in order to decrease her gender dysphoria. Upon arriving to the suicide watch cell, inmate was laying in bed but presented at cell front to speak with this writer.

Inmate appeared alert and oriented. She reported her mood as "good" and her affect matched. Her rate and tone of speech were within normal limits. She denied any experience of psychotic symptoms and no delusional thinking or hallucinatory experiences were overtly evident in her presentation. She denied current suicidal ideation, intention, or plans. She continued to report disrupted sleep but noted that she utilized a nightmare invention that she was given and noticed helpful results. She believed that her nightmares have decrease since her use pf this intervention.

Per recommendations in the SRA completed 5/18/2020, this author and inmate SOUTH discussed reasons to live and distress tolerance coping skills. Specifically IM SOUTH reported continued development of her coping cards and coping skills. She indicated that she believes her most recent suicide attempt was "scary" and that she feels that this has put all of her suicidal ideation out of her head. She indicated that she has realized she has many reasons to live. With that said, she also reported concerns about her transfer to SHU. She indicated that she believes having a cellmate will increase her suicidal ideation because she will fear for her safety due to her previous experiences in SHU. She strongly advocated to be celled alone and noted that when she has personal space she is better able to use distress tolerance skills and does not have to "worry" about another person and their reaction. She was also able to tolerate this writers opinion that she may be more at risk for suicide if she is celled alone without as much interaction. She appeared respectful of the differing perspectives and this writer indicated that staff would continue to take her request into consideration.

IM SOUTH also asked for the program statement for suicide watch and for incident reports. She explained that she believed that she should not have been read her incident reports while on suicide watch as she believes they triggered her and therefore she reacted negatively. She acknowledged that she is responsible for her behavior but also noted that she did not feel that this should happen for anyone. This writer indicated that she has the right to file grievances regardless of the policy and that she would be able to obtain these policies once she has access to the law library.

Recommendations

Suicide watch will continue and she will be monitored daily.

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current
 Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current
 Cannabis Use Disorder, Severe, F12.20*b - Current
 Gender Dysphoria In Adolescents And Adults, F64.1 - Current
 Posttraumatic Stress Disorder, F43.10 - Current
 Borderline Personality Disorder, F60.3 - Current
 Other Specified Personality Disorder, F60.89 - Current

Inmate Name:	SOUTH, JASON ROBERT	Sex:	M	Facility:	FTD	Reg #:	57903-019
Date of Birth:	09/11/1978	Provider:	Bell, A. Psy.D.	Unit Team:	UNIT 5702		
Date:	06/01/2020 13:35						

Completed by Bell, A. Psy.D. on 06/01/2020 13:53

**Bureau of Prisons
Psychology Services
Suicide Watch Contact**

****SENSITIVE BUT UNCLASSIFIED****

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M Facility: FTD	Unit Team: UNIT 5702
Date: 05/31/2020 10:38	Provider: Bell, A. Psy.D.	

Observations

Inmate SOUTH was seen on this date for her daily suicide watch contact. She was placed on suicide watch on 5/18/2020 after she endorsed suicidal ideation, intention, and plans and engaged in self-described suicide attempts. A review of the log books indicated that she has been sleeping, eating, engaging in conversation with the suicide watch officer, and reading/working on self help materials. Upon arriving to the suicide watch cell, inmate was laying in bed writing but presented at cell front to speak with this writer.

Inmate appeared alert and oriented. She reported her mood as "good" and her affect matched. She noted that she had several more bad dreams last night but reported use of grounding skills that aided in distraction and relaxation to go back to sleep. Her rate and tone of speech were within normal limits. She denied any experience of psychotic symptoms and no delusional thinking or hallucinatory experiences were overtly evident in her presentation. She denied current suicidal ideation, intention, or plans.

Per recommendations in the SRA completed 5/18/2020, this author and inmate SOUTH discussed reasons to live and distress tolerance coping skills. Specifically IM SOUTH reviewed some of the coping cards that she had been working on to include one with positive coping statements, one with the STOP skill, and one with her reasons to live. She expressed enjoyment in creating these cards and believed they would be useful in stressful moments. She also shared an RSA that she completed after her shower yesterday. She noted that the LT requested the she remain handcuffed during her shower as a precaution, although she reported that other LTs did not require this. She reported feeling the "hulk" begin but quickly challenged her thinking and diffused her anger. She challenged her irrational thoughts surrounding the situation and reported that she discussed this with the suicide watch officer later. She reported pride in being able to manage her emotions in the moment and cope effectively. She denied having suicidal ideation in that moment. Additionally, she has been utilizing her tracking sheets for the use of her skills. IM SOUTH appears to be regularly utilizing and practicing her coping skills, as well as tolerating distressing emotions and thoughts.

Recommendations

Suicide watch will continue and she will be monitored daily.

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current
 Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current
 Cannabis Use Disorder, Severe, F12.20*b - Current
 Gender Dysphoria In Adolescents And Adults, F64.1 - Current
 Posttraumatic Stress Disorder, F43.10 - Current
 Borderline Personality Disorder, F60.3 - Current
 Other Specified Personality Disorder, F60.89 - Current

Completed by Bell, A. Psy.D. on 05/31/2020 10:49

**Bureau of Prisons
Psychology Services
Suicide Watch Contact**

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M	Facility: FTD
Date: 05/29/2020 11:14	Provider: Bell, A. Psy.D.	Unit Team: UNIT 5702

Observations

Inmate SOUTH was seen on this date for her daily suicide watch contact. She was placed on suicide watch on 5/18/2020 after she endorsed suicidal ideation, intention, and plans and engaged in self-described suicide attempts. A review of the log books indicated that she has been sleeping, eating, engaging in conversation with the suicide watch officer, and reading self help materials. This writer observed that the log book noted that IM SOUTH was "flossing." This writer asked IM SOUTH about this and she showed this writer a small piece of a plastic bag that she has used to floss her teeth (it was visibly placed on the sink). IM SOUTH indicated that she had also made a hair tie out of it. She indicated that she received a sandwich in the plastic bag and then created these items from it. She also had the plastic bag near her papers that had crackers in it. This writer informed her that she should not have been given this item but that this writer was happy to see that she did not use it to harm herself. Rather, she utilized this item in a future orientated way to take care of her hygiene, which she reported is important to her. She is being monitored by staff only. Upon arriving to the suicide watch cell, inmate was standing at the cell front speaking to staff.

Inmate appeared alert and oriented. She reported her mood as "good" and her affect matched. Her rate and tone of speech were within normal limits. She denied any experience of psychotic symptoms and no delusional thinking or hallucinatory experiences were overtly evident in her presentation. She denied current suicidal ideation, intention, or plans.

Per recommendations in the SRA completed 5/18/2020, this author and inmate SOUTH discussed reasons to live and distress tolerance coping skills. Specifically this writer processed her reaction and subsequent emotional expression that occurred after this writer's contact. See additional contact on yesterdays date for further details. This writer reviewed an RSA with IM SOUTH on her irrational thoughts, the ways that she did or did not challenge these thoughts, and the consequences. She reported feeling concerned that she upset or made this writer uncomfortable. She acknowledged that she does have "issues" with boundaries, abandonment, and rejection. This writer discussed these patterns and encourage her to utilize this situation to learn how to have appropriate boundaries and also express herself in a manner that is authentic and appropriate. This writer also discussed IM SOUTH's desire to increase her feminine mannerisms and that this gesture is more feminine in nature. IM SOUTH reported feeling better after the conversation and thanked this writer.

IM SOUTH continued to ask questions about her transfer to SHU. This writer continued to express a desire to work towards a solid plan for her transfer to SHU and encouraged IM SOUTH to make a list of all her coping skills she knows she can use in SHU and the areas where she believe she may need some more support. She agreed to do this and stated that she is concerned about previous inmates whom she filed PREA allegations against, the staff member whom she received an incident report for threatening, and about who she may be celled with. This writer acknowledged her concerns and reported that they will be carefully considered.

Comments

IM SOUTH was given soap and a hair tie. She will also be allowed to brush her teeth but the toothbrush and paste must be removed from the cell when complete.

Recommendations

Suicide watch will continue and she will be monitored daily.

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current

Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current

Cannabis Use Disorder, Severe, F12.20*b - Current

Gender Dysphoria In Adolescents And Adults, F64.1 - Current

**Bureau of Prisons
Psychology Services
Suicide Watch Contact**

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M	Unit Team: UNIT 5702
Date: 05/30/2020 09:19	Facility: FTD	
	Provider: Bell, A. Psy.D.	

Observations

Inmate SOUTH was seen on this date for her daily suicide watch contact. She was placed on suicide watch on 5/18/2020 after she endorsed suicidal ideation, intention, and plans and engaged in self-described suicide attempts. A review of the log books indicated that she has been sleeping, eating, engaging in conversation with the suicide watch officer, and reading self help materials. Upon arriving to the suicide watch cell, inmate was sleeping but awoke to speak with this writer.

Inmate appeared alert and oriented. She reported her mood as "fine" and her affect matched. She noted that she may have just woken from a nightmare as she had been having several dreams over the past few hours. Her rate and tone of speech were within normal limits. She denied any experience of psychotic symptoms and no delusional thinking or hallucinatory experiences were overtly evident in her presentation. She denied current suicidal ideation, intention, or plans.

Per recommendations in the SRA completed 5/18/2020, this author and inmate SOUTH discussed reasons to live and distress tolerance coping skills. Specifically IM SOUTH reported that she read the self-help materials provided the day before but that she was tired and had not begun her other homework. She indicated that she would do this today. IM SOUTH continued to ask questions about her transfer to SHU. This writer acknowledged her concerns and reported that they will be carefully considered. Lastly, IM SOUTH indicated that she began to write a letter to her unit manager, who she identified as a positive support. She questioned if was appropriate to write her a letter based on the previous day's contact regarding boundaries. This writer processed the purpose of the letter and what would be appropriate and not appropriate. At the end of this contact, IM SOUTH was provided the opportunity to shower and clean her cell.

Recommendations

Suicide watch will continue and she will be monitored daily.

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current

Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current

Cannabis Use Disorder, Severe, F12.20*b - Current

Gender Dysphoria In Adolescents And Adults, F64.1 - Current

Posttraumatic Stress Disorder, F43.10 - Current

Borderline Personality Disorder, F60.3 - Current

Other Specified Personality Disorder, F60.89 - Current

Completed by Bell, A. Psy.D. on 05/30/2020 09:28

**Bureau of Prisons
Psychology Services
Suicide Watch Contact**

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M	Facility: FTD
Date: 10/28/2020 13:14	Provider: Marantz, Stacie PsyD/Chief	Unit Team: UNIT 5702

Observations

This writer was called down to the suicide watch area. The officer indicated that Ms. South became upset and threw her lunch in the room as well as all her papers. He stated that she did calm down and clean the area up, but requested to speak with psychology.

Ms. South stated she wanted to express her feelings and discuss what triggered her to get upset. She stated that she was upset over an interaction she had with Dr. Bell earlier. She acknowledged that she has problems with boundaries and that she realizes that she crossed a boundary earlier with Dr. Bell. She indicated she was upset because she felt scolded by Dr. Bell. This writer had her think about her responsibility in the interaction and if she was "scolded" or did Dr. Bell appropriately remind her to watch her boundaries? She stated her feelings were hurt but that thinking rationally she realizes that it was her actions that were wrong, not Dr. Bell. Ms. SOUTH also stated that she has been feeling paranoid, thinking that we are trying to get her transferred to the Stages program. This writer reminded her that Dr. Bell talked to her about the program, the program is voluntary and she declined going, therefore we cannot transfer her there. This writer did express her opinion that Dr. Bell and I think it is an appropriate program for her but we are not pursuing a transfer. Ms. SOUTH was reminded that she needs to stop, and think before reacting. She agreed. This writer recommended that she count to 5 and take a breath when she feels her emotions are escalating so she has time to think about her actions. She was asked if she knows how to do an RSA and she stated she did. This writer told her that she would be provided copies of RSAs to use, especially in situations that happened today. Also discussed how these behaviors indicate she is not ready to come off of suicide watch. Ms. SOUTH stated that she was happy that when she did get upset and was throwing her food and ripping the papers she did not have any thoughts of harming herself. She was commended on this and encouraged to focus on that. She was reminded that her behavior today as before was a set back and she can move forward. She agreed. She became tearful and started to apologize. This writer told her that she had no reason to apologize and she needs to work on apologizing to herself. She calmed down. She was provided an exercise to do when she becomes upset. She was told to think of a favorite memory and while thinking about it to focus on her 5 senses (what she sees, hears, smells, feels, and tastes). She agreed to practice that. Ms. SOUTH also asked if this writer could intervene with her medication. When asked the concern, she stated that while she was on the compound she was doubling her dose and since on suicide watch they are only giving her the prescribed amount. This writer told her that she would not talk to medical about this as she was not following medical's directions and that she will need to address her concerns with medical. She agreed.

Ms. SOUTH agreed to straighten her papers and cell. She thanked this writer for speaking with her.

Recommendations

Suicide watch will continue and he will be monitored daily.

Completed by Marantz, Stacie PsyD/Chief Psychologist on 05/28/2020 13:37

Inmate Name:	SOUTH, JASON ROBERT	Sex:	M	Facility:	FTD	Reg #:	57903-019
Date of Birth:	09/11/1978	Provider:	Bell, A. Psy.D.			Unit Team:	UNIT 5702
Date:	05/29/2020 11:14						

Posttraumatic Stress Disorder, F43.10 - Current

Borderline Personality Disorder, F60.3 - Current

Other Specified Personality Disorder, F60.89 - Current

Completed by Bell, A. Psy.D. on 05/29/2020 12:05

Inmate Name:	SOUTH, JASON ROBERT			Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M	Facility:	FTD
Date:	05/28/2020 10:08	Provider:	Bell, A. Psy.D.	Unit Team:	UNIT 5702

IM SOUTH was given the homework of completing a formal chain analysis on the events leading up to her placement on suicide watch. She asked a few questions regarding the definitions of certain words on the form but appeared to understand the concept. She also reported enjoying the self-help materials that were provided. She noted wanting to work on utilizing her "wise mind" more often and reported wanting to make a card that she can carry around with herself that had the STOP or TIP skill steps as a reminder. This writer encouraged her to do this.

Lastly, IM SOUTH asked about her transition to SHU and when this may occur. This writer reported that IM SOUTH would remain on suicide watch over the weekend and that if she continues to display safe behavior a plan for transition to SHU will be discussed next week.

Comments

This writer is scheduled to meet with the Chief Psychologist, Unit Manager, and AW over Psychology on Monday in order to discuss a transition plan.

Recommendations

Suicide watch will continue and she will be monitored daily.

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current

Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current

Cannabis Use Disorder, Severe, F12.20*b - Current

Gender Dysphoria In Adolescents And Adults, F64.1 - Current

Posttraumatic Stress Disorder, F43.10 - Current

Borderline Personality Disorder, F60.3 - Current

Other Specified Personality Disorder, F60.89 - Current

Completed by Bell, A. Psy.D. on 05/28/2020 13:50

**Bureau of Prisons
Psychology Services
Suicide Watch Contact**

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M	Facility: FTD
Date: 05/28/2020 10:08	Provider: Bell, A. Psy.D.	Unit Team: UNIT 5702

Observations

Inmate SOUTH was seen on this date for her daily suicide watch contact. She was placed on suicide watch on 5/18/2020 after she endorsed suicidal ideation, intention, and plans and engaged in self-described suicide attempts. A review of the log books indicated that she has been sleeping, eating, engaging in conversation with the suicide watch officer, and reading self help materials. Log books also indicate that IM SOUTH received a shower last evening as well as a clean smock and blanket. She is being monitored by staff only. Upon arriving to the suicide watch cell, inmate was standing at the cell front speaking to staff.

Inmate appeared alert and oriented. She reported her mood as "good" and her affect matched. Her rate and tone of speech were within normal limits. She denied any experience of psychotic symptoms and no delusional thinking or hallucinatory experiences were overtly evident in her presentation. IM SOUTH did reported that she noticed heightened sensations in her hearing, taste, and smell. She questioned if this was related to her possible head injuries that she sustained from head banging. This writer encouraged her to speak with health services but also provided psychoeducation regarding the physiological response to stress to include heightened sensations. This writer noted that these responses could also be related to her increase in reported nightmares and flashbacks. She was encouraged to continue to utilize relaxation techniques in order to slow her physiological response. She denied current suicidal ideation, intention, or plans.

Per recommendations in the SRA completed 5/18/2020, this author and inmate SOUTH discussed reasons to live and distress tolerance coping skills. Specifically this writer reviewed IM SOUTH's task to complete a reason for living card. She created a list of reasons to live to include supportive people in her life, activities that she wants to engage in upon release from prison, and the larger desire to live her life as a woman. This writer commented on the broad and specific reasons or goals that she listed and encouraged her to continue to add to this list as a reminder when she has suicidal or hopeless ideation. She shared that she was about to write one down prior to this writers arrival about a staff that she met during her transport to the outside hospital last week who was supportive of her transition and told IM SOUTH that she was "brave" for pursuing her transition while in a male facility. IM SOUTH reported feeling touched by this comment and noted that she wanted to remember it. This writer reinforced her use of this memory and encouraged her to think of it when she experiences black and white or absolute thinking.

IM SOUTH reported that she slept on and off last night due to having several vivid "nightmares," although she reported that these were not the same as the nightmare/flashback that she reported the other day. She indicated that the dream content included "my grandmother being lost," someone else cutting her wrists, her shaving her facial hair, and her being bullied as a female in high school. She noted that in the middle of the night after waking from these dreams she engaged in several distress tolerance/ grounding techniques to include splashing water on her face and neck, counting, counting wall tiles, and thinking of positive people or memories. She was provided positive verbal reinforcement for her use of coping skills. She indicated that she engaged in these behaviors for approximately 5-10 minutes and that she was eventually able to relax enough to fall back asleep. This writer also provided her with psychoeducation regarding other grounding techniques to utilize if this occurs again.

After yesterday's conversation regarding control and its impact on her suicidal ideation, this writer provided IM SOUTH with psychoeducation materials on feeling a sense of control. This material also addressed the importance of setting appropriate boundaries as an aspect of maintaining control. This writer used the example that this writer had observed IM SOUTH had utilized her hands to make a heart symbol to this writer and other staff at the end of a conversation. This writer expressed that they believed IM SOUTH was displaying this symbol to express her appreciation for this writer, and other staffs, work with her but noted that these relationships are professional. This writer explained that this expression could be misinterpreted as crossing a boundary and discussed alternative ways to either verbally or nonverbally express her appreciation. She asked if displaying a peace sign would be more appropriate, which this writer indicated it would.

Inmate Name:	SOUTH, JASON ROBERT	Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M
		Facility:	FTD
Date:	05/27/2020 12:23	Provider:	Bell, A. Psy.D.
		Unit Team:	UNIT 1

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current

Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current

Cannabis Use Disorder, Severe, F12.20*b - Current

Gender Dysphoria In Adolescents And Adults, F64.1 - Current

Posttraumatic Stress Disorder, F43.10 - Current

Borderline Personality Disorder, F60.3 - Current

Other Specified Personality Disorder, F60.89 - Current

Completed by Bell, A. Psy.D. on 05/27/2020 13:42

**Bureau of Prisons
Psychology Services
Suicide Watch Contact**

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M	Facility: FTD
Date: 05/27/2020 12:23	Provider: Bell, A. Psy.D.	Unit Team: UNIT 1

Observations

Inmate SOUTH was seen on this date for her daily suicide watch contact. She was placed on suicide watch on 5/18/2020 after she endorsed suicidal ideation, intention, and plans and engaged in self-described suicide attempts. A review of the log books indicated that she has been sleeping, eating, engaging in conversation with the suicide watch officer, and reading self help materials. She is being monitored by staff only.

Upon arriving to the suicide watch cell, inmate was standing at the cell front speaking to staff regarding her lunch. This writer observed a paper to be hanging on the wall of her suicide watch cell that appeared to be attached by a sticky note. When asked what this was, IM SOUTH showed this writer that it was one of the self-help sheets on coping thoughts that she believed was helpful.

Inmate appeared alert and oriented. She reported her mood as "great" and her affect was matched. Her rate and tone of speech were within normal limits. She denied any experience of psychotic symptoms and no delusional thinking or hallucinatory experiences were overtly evident in her presentation. She did report having self-described flashback "the other day" in which she described as "scary, spooky, and weird." She appears to be talking about her behavior on 5/25/2020 (see note for further details). She denied current suicidal ideation, intention, or plans but did note that she had fleeting suicidal ideation in response to feeling "sad/overwhelmed" the other day. She indicated that she does not have any intention or plans and is rather "scared" thinking about the attempts that she did make as she is glad she is still alive.

Per recommendations in the SRA completed 5/18/2020, this author and inmate SOUTH discussed reasons to live and distress tolerance coping skills. IM SOUTH reported that she is feeling better and believes that this is partially due to her medications and hormones being balanced. She indicated that she believes that she was "withdrawing" from her Duloxetine and that this cause her emotional distress. She indicated that she did not want to use this as an excuse, as she believes that she wants to work towards making changes in her behavioral response. This writer provided psychoeducation regarding the ABC model of thoughts, feelings, and behaviors. This writer indicated that IM SOUTH's suicidal ideation appears to quickly escalate to suicidal behavior. She indicated that she believes that she has always viewed suicide as an "escape" from emotional pain when she felt overwhelmed with emotions. She noted that when she is able to manage these ideations and even intentions without acting on them, she notices that she is able to calm herself down and her ideation and intention passes as she does have reasons to live. IM SOUTH also discussed how her desire to be in control, as opposed to being controlled, fuels her suicidal ideation. She acknowledged that when she feels she is being controlled or encounters authoritative situations that she does not like, she believes that she can take back the control by threatening, considering suicidal ideation or engaging in suicidal behaviors. She noted that this cycle actually gives the power back to the other person. This writer engaged in conversation regarding her use distress tolerance and encouraged her to utilize her coping skills on a regular basis, even not when in distress. This writer and IM SOUTH engaged in conversation regarding her goals moving forward to include increased use of coping skills (specifically distress tolerance), regular reminder of her reasons to live, and utilizing chain analysis to better understand her triggers and precipitating factors. IM SOUTH indicated that her reasons for living right now are her sister, her desire to live as a woman, her treatment successes, and her desire to participate in life outside of incarceration. She indicated that while she is experiencing some shame and embarrassment regarding her behavior over the past week while on suicide watch, she does believe that having gone through this, she will be better equipped to continue making treatment gains and positive changes. IM SOUTH was given the homework to create a reasons for living card to hang in her cell while on suicide watch and once she transfers to SHU. She was encouraged to be creative in the development of this to include drawing, poetry, or simply a list. She indicated that she would work on this and present it tomorrow.

Recommendations

Suicide watch will continue and she will be monitored daily. She was approved to have a flex pen in the cell in order to work on her self-help materials. She was informed that the pen must be visible in the cell at all times, which she expressed understanding.

**Bureau of Prisons
Psychology Services
Suicide Watch Contact**

SENSITIVE BUT UNCLASSIFIED

Inmate Name:	SOUTH, JASON ROBERT	Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M
		Facility:	FTD
Date:	05/24/2020 09:19	Unit Team:	UNIT 1
		Provider:	Gomez, D. PsyD, NR DAPC

Observations

Inmate South was seen by this writer at approximately 0930 on 5/24/20. Due to a server outage, this writer was unable to put the note into BEMR until this date.

Prior to meeting with inmate South this writer reviewed the log books. Inmate South has eaten all meals, taken her medication, and been observed working on her workbook. She was alert and fully oriented when he interacted at cell front. Inmate South was calm throughout the interaction and denied any form of distress. She expressed an interest in obtaining a shower. She indicated that she was mad at this writer for "not offering (her) a spoon." She elaborated, "yesterday my meal had rice. I was really mad at you for not thinking about that and approving a spoon for me. But, I calmed myself down by reading the DBT chapter you gave me."

Inmate South minimized her recent actions and attributed her self injury to her hormones. She explained, "man that was a rollercoaster. My hormones feel stable now. I feel much clearer."

Completed by Gomez, D. PsyD, NR DAPC on 05/25/2020 09:25

**Bureau of Prisons
Psychology Services
Suicide Watch Contact**

****SENSITIVE BUT UNCLASSIFIED****

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M	Facility: FTD
Date: 05/23/2020 09:50	Provider: Gomez, D. PsyD, NR DAPC	Unit Team: UNIT 1

Observations

Inmate South was seen by this writer due to her continued placement under suicide watch. A review of the log books shows that inmate South has eaten several meals and spent most of her time resting. She has not engaged in any self injurious behavior in the last 24 hours.

Inmate was alert and fully oriented during our interaction today. She presented with euthymic mood and affect. She was holding two pieces of toilet paper in her hand. One had a droplet of blood, the other had numerous small black hairs. She explained, "I've been pulling out the tiny hairs from my mustache." She indicated that it was not a self injurious behavior or done for emotion regulation purposes. She explained, "I hate having facial hair. I can't shave on watch and it started growing." She expressed frustration about the growth of "male" hairs.

Inmate South indicated that she was "feeling better" overall. She explained, "my Duloxetine feels stable now. I was feeling dizzy and emotional while getting it back to normal. I feel stable and calm now." She then asked for a copy of the DBT materials she worked on during her previous watch. This writer provided her with those materials.

Recommendations

Suicide watch will continue and he will be monitored daily.

Completed by Gomez, D. PsyD, NR DAPC on 05/23/2020 09:56

**Bureau of Prisons
Psychology Services
Suicide Watch Contact**

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M Facility: FTD	Unit Team: UNIT 1
Date: 05/22/2020 09:19	Provider: Bell, A. Psy.D.	

Observations

Inmate SOUTH was seen on this date for her daily suicide watch contact. She was placed on suicide watch on 5/18/2020 after she endorsed suicidal ideation, intention, and plans and engaged in self-described suicide attempts. A review of the log books indicated that she has been sleeping and attempting to eat. She is being monitored by staff only. Upon arriving to the suicide watch cell, inmate was pacing in the suicide watch cell.

Inmate appeared alert and oriented. She reported her mood as "frustrated" and her affect was matched. Her rate and tone of speech were initially rapid and pressured. She denied any experience of psychotic symptoms and no delusional thinking or hallucinatory experiences were overtly evident in his presentation. Initially she did endorse having suicidal ideation and intent.

Per recommendations in the SRA completed 5/18/2020, this author and inmate SOUTH discussed reasons to live. IM SOUTH reported feeling frustrated and hopeless due to a situation that occurred prior to this writer arriving to the suicide watch area. IM SOUTH reported that she had been throwing up yesterday and therefore was slowly eating her breakfast this morning as she felt nauseous. She noted that she was encouraged to eat by both Psychology and Health Services staff so she was trying to do so. IM SOUTH reported that the LT took her breakfast tray out of her cell without any reason. She noted that she felt that the LT was "bullying" her and that she was "tired of the toxic masculinity" that occurred in this institution. This writer encouraged her to engage in relaxation techniques in order to calm down. This writer supported her in engaging in deep breathing and attempted to challenge her thinking errors. Specifically IM SOUTH stated that "no one" cares about her, which this writer reminded her to people do care about her. In response to her feeling hopeless, this writer discussed the progress that she has made in her mental health treatment and in her gender transition. IM SOUTH reported that she was informed that her hormones are at the appropriate level at this time, which means that she can be reviewed for transfer to a female institution. It should be noted that IM SOUTH has already formally requested this transfer and it is in the review process. As the conversation progressed, IM SOUTH appeared to calm herself down and was able to utilize rational thinking and thought challenging. She noted that she quickly thinks of suicide when she feels stressors or overwhelmed as she wants to get rid of the uncomfortable emotions. This writer acknowledged her desire to rid herself of negative emotions, but reminded IM SOUTH that she does have the tools to manage distress and that these negative emotions will pass. She acknowledged that she does have reasons to live to include her social supports, her goals for transition, and her goals for her mental health treatment. She expressed a desire to continue to engage in treatment in order to improve these skills. This writer reminded IM SOUTH that all emotions are okay to experience, including anger and sadness, but that IM SOUTH can learn new ways to manage these emotions so that she does not feel that suicide is her only option. She reported that she does not want to die and that she has reasons to live, but that she is concerned about going to SHU after she leaves suicide watch. She noted that the last time she was in SHU was at her previous institution. She indicated that she was placed in SHU after a reported sexual assault. IM SOUTH expressed concern that she may reexperience thoughts or feelings similar to the ones she experienced during that time. This writer validated her concern and reported that this writer wants to continue to discuss her transition to SHU in order to have a plan in case these feelings do arise. This writer indicated that she will continue to receive psychology services while placed in SHU. IM SOUTH also requested that this writer be her staff representative for her DHO hearing. At the conclusion of the conversation, this writer asked IM SOUTH how she was feeling. She indicated that she felt better and that she wished she had not gotten so upset earlier. She noted that she believes she is in a vulnerable state when the LT came to the cell as she had just woken up. She indicated that this was not an excuse for her behavior but a contributing factor to her difficulty in managing the distress.

Additionally, IM SOUTH requested reading materials and the opportunity to shave. This writer indicated that they had concern about giving her items due to her recent suicidal behavior. This writer indicated that if IM SOUTH continues to display safe behavior for the next couple of days, then she may be provided self-help materials. This writer expressed concern about the use of a razor at this time, which IM SOUTH understood. This writer expressed understanding that removing her facial hair is important to IM SOUTH due to the dysphoria that it causes her. She noted that she cannot see herself as she does not have a mirror at this time therefore it is less bothersome to her. This writer noted that they

Inmate Name:	SOUTH, JASON ROBERT	Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M
		Facility:	FTD
Date:	05/22/2020 09:19	Provider:	Bell, A. Psy.D.
		Unit Team:	UNIT 1

will keep this in mind she works towards more privdelges.

Comments

It should be noted that her risk for suicide at this time appears to be high. This is based on her repeated suicide attempts via multiple methods (head banging, cutting, and aphysicifixation) since being placed on suicide watch. Her risk was initially rated as moderate at the time of her placement on suicide watch due to her suicidal ideation and initial attempt appearing to be in response to situational factors. She has a history of quickly thinking of suicide when stressors occur but has been able to manage this distress well over the past several months. At this time it does not appear that she is as successful in managing stressors and tolerating distress. Therefore, her acute risk for suicide is considered high at this time.

Recommendations

Suicide watch will continue and she will be monitored daily.

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current
Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current
Cannabis Use Disorder, Severe, F12.20*b - Current
Gender Dysphoria In Adolescents And Adults, F64.1 - Current
Posttraumatic Stress Disorder, F43.10 - Current
Borderline Personality Disorder, F60.3 - Current
Other Specified Personality Disorder, F60.89 - Current
Completed by Bell, A. Psy.D. on 05/22/2020 12:20

Inmate Name:	SOUTH, JASON ROBERT	Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M
		Facility:	FTD
Date:	05/20/2020 10:21	Provider:	Bell, A. Psy.D.
		Unit Team:	UNIT 1

According to documentation, IM SOUTH was removed from ambulatory restraints at approximately 7:30pm last night. According to log books she continued to present as calm and cooperative.

Recommendations

IM SOUTH was sent to an outside hospital in order to rule out possible head trauma due to her current symptoms and engagement in head banging. Suicide watch will continue upon return and she will be monitored daily. If IM SOUTH returns back from the outside hospital during business hours, this writer will check in with her.

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current
Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current
Cannabis Use Disorder, Severe, F12.20*b - Current
Gender Dysphoria In Adolescents And Adults, F64.1 - Current
Posttraumatic Stress Disorder, F43.10 - Current
Borderline Personality Disorder, F60.3 - Current
Other Specified Personality Disorder, F60.89 - Current
Completed by Bell, A. Psy.D. on 05/20/2020 11:30

**Bureau of Prisons
Psychology Services
Suicide Watch Contact**

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M	Facility: FTD
Date: 05/20/2020 10:21	Provider: Bell, A. Psy.D.	Unit Team: UNIT 1

Observations

Inmate SOUTH was seen on this date for her daily suicide watch contact. She was placed on suicide watch on 5/18/2020 after she endorsed suicidal ideation, intention, and plans and engaged in self-described suicide attempts. A review of the log books indicated that she slept throughout the night. The log books indicated that she was provided her evening meal and that she was observed eating it, although during this contact the clamshell appeared to have most of her meal still in it. She is being monitored by staff only. When this writer initially approached the suicide watch area at approximately 7:00am, IM SOUTH was sleeping and therefore this writer reported that they would return later in the day.

At approximately 7:45am this writer was called by control to report to the suicide watch area. Upon arrival medical staff were observed to be outside the suicide watch cell and IM SOUTH was observed to be sitting on the side of her bed with her head in her hands. The suicide watch officer reported that he observed IM SOUTH fall out of bed and she appeared to be unsteady. IM SOUTH reportedly stated that she felt dizzy, at which time the suicide watch office notified staff. IM SOUTH then laid down on the mattress and closed her eyes. She indicated that the florescent light in the suicide watch cell was making her dizziness worse, and therefore it was turned off. When the Operations Lt arrived, medical staff entered the cell in order to assess IM SOUTH. Initially she appeared oriented to place as she noted that she was in prison at an institution called "dix." She was asked to open her eyes in order to assess her but she indicated that she was unable. She was observed to be breathing heavily and her vital signs showed an increased heart rate. This writer attempted to engage in guided deep-breathing in order to aid in lowering her heart rate and calming her down. She was observed to be crying, tightly grabbing the restraint bars on the concrete bed, and making writhing movements with the lower part of her body. During this time, medical continued to assess her and this writer was in and out of the suicide watch cell to attempt to console IM SOUTH. Her speech became difficult to understand as she was speaking softly and at an inconsistent rate. She was observed to be counting which the Psychiatrist believed was in efforts to calm herself down. She was also observed to be making statements about flying such as "I don't want to fly." At one point IM SOUTH moved herself into a fetal-like position and appeared to be making vomiting sounds and was heard passing gas. She was not observed to produce anything from the vomiting movements. At one point she reportedly made a comment that she wanted female staff to help her and therefore this writer and the female Lt stayed in the room.

Medical staff determined that she needed to receive an x-ray of her head. Staff attempted to get IM SOUTH to sit up and walk across the hall to the x-ray room. IM SOUTH did not comply with the directives to sit up and move therefore staff assisted her into a wheelchair and she was transported to the x-ray room. She continued to present as disoriented and difficult to understand. She continued to appear tearful and fearful as she would clench her hands on various items and would have to be redirected several times to unclench her grip. She was also observed to be saying "I don't want to die" and "I don't want to fly." Throughout this process, this writer continued to provide verbal counsel to inform her of what was taking place, remind her that staff want to keep her safe, and to give verbal praise for cooperating with directives. She was placed back in the suicide watch area upon completion of the x-rays and she appeared to be calming down as her breathing was less labored, she was not trying to clench anything, and she was not observed to be making any verbalizations or sounds of distress. Shortly after placement back in the suicide watch cell, medical staff informed this writer that IM SOUTH was going to be sent to an outside hospital to exam her head to rule out any head trauma due to her repeated incidents of head banging.

While waiting for the transfer to an outside hospital, this writer checked on IM SOUTH who was observed to be laying in her bed with the blanket over her face. This writer noted that she was breathing based on her chest movements but wanted to ensure that she was okay. This writer spoke to IM SOUTH and asked her to remove the blanket from her face so that staff observing her could see her. She appeared to awake from sleep and complied with this request. She appeared to be oriented at this time but did not recall the above mentioned events. She reported pain in her head and was slow in her movements. She was cooperative with staff in changing her clothes to prepare for her medical trip and expressed understanding that she would be going to an outside hospital for further examination. She continued to display difficulty walking therefore she was transported to the ambulance in a wheelchair.

Changes Since Last Contact

**Bureau of Prisons
Psychology Services
Suicide Watch Contact**

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT	Sex: M	Facility: FTD	Reg #: 57903-019
Date of Birth: 09/11/1978	Provider: Bell, A. Psy.D.		Unit Team: UNIT 1
Date: 05/19/2020 13:45			

Observations

This writer was informed that IM SOUTH would be receiving her incident reports today, while on suicide watch. Psychology recommended that this process be postponed due to her current emotional state but this recommendation was not taken. Therefore, this writer was present while IM SOUTH received her incident reports at approximately 1:15pm. She became agitated while the Lt was reading her the incident reports yelling that she did not threaten staff. She made this statement several times and seemed to focus on it even while hearing other information/incident reports. This writer, and the LT, provided verbal counseling when she became agitated and encouraged her to listen to the report so that she could make her statement regarding the incident. At one point she noted that "none of this matters" as she believed her recount of the situation would not matter. This writer reminded her that she has a right to share her statement and that if she did not engage in the alleged behavior, then her statement is even more important. IM SOUTH was able to be consoled and was cooperative with the process. At the end of the process she indicated that she was having thought of banging her head and that she felt overwhelmed by the information. Specifically she reported concern that these incident reports may raise her points to high security which could result in placement in a USP. At this time she requested medications to help her calm down. This writer reinforced her appropriate use of coping skills in order to prevent self-harming behavior. She was provided an Ativan injection by Health Services staff.

Comments

IM SOUTH continued to be placed in 4-pt restraints at the time of this contact.

Recommendations

Suicide watch will continue and she will be monitored daily.

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current
 Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current
 Cannabis Use Disorder, Severe, F12.20*b - Current
 Gender Dysphoria In Adolescents And Adults, F64.1 - Current
 Posttraumatic Stress Disorder, F43.10 - Current
 Borderline Personality Disorder, F60.3 - Current
 Other Specified Personality Disorder, F60.89 - Current

Completed by Bell, A. Psy.D. on 05/19/2020 16:11

**Bureau of Prisons
Psychology Services
Suicide Watch Contact**

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M	Facility: FTD
Date: 05/19/2020 11:39	Provider: Bell, A. Psy.D.	Unit Team: UNIT 1

Observations

Inmate SOUTH was seen on this date for her daily suicide watch contact at approximately 9:10am. She was placed on suicide watch on 5/18/2020 after she endorsed suicidal ideation, intention, and plans and engaged in self-described suicide attempts. A review of the log books indicated that she has been calmly laying in the bed in the four point restraints that were placed on her at approximately 7:30am. She is being monitored by staff only.

Inmate appeared alert and oriented. She reported her mood as "better" and her affect was appropriate. Her rate and tone of speech were within normal limits. She denied any experience of psychotic symptoms and no delusional thinking or hallucinatory experiences were overtly evident in her presentation. She did not endorse having any suicidal ideation, intent, or plan at this time but did report continued distress related to her overall current situation.

Per recommendations in the SRA completed 05/18/2020, this author and inmate SOUTH discussed reasons to live. She reported that she was remorseful for the way she presented earlier and indicated that he felt that she should have taken her medications prior to hearing the news about her incident reports and being transferred to SHU. She continued to express concern about this but acknowledged that there were consequences to her behavior. She engaged in a informal chain analysis to examine the pattern of her behavior and which factors may have contributed. She continued to report the lack of medication as a significant factor. She also noted that she had experienced suicidal ideation over the weekend and considered "putting myself in here" (referring to suicide watch) as she was concerned that she was not able to cope with these thoughts. She indicated that she believes she should have told someone that she was experiencing these thoughts in order to receive help. IM SOUTH expressed that she does believe she has a life worth living to include her relationship with her sister, her current transition, and the changes that she has already made in treatment. She expressed commitment to continuing treatment in order to learn how to better cope with stress. This writer provided positive verbal reinforcement of her calm behavior and use of rational thinking. This writer reminded her of the coping skills that she can use and encouraged her to do so. This writer also encouraged her to remain focused on the present moment through the use of mindfulness as not to ruminate and overwhelm herself with the next steps. She did express concern about being placed in SHU and asked if she was going to be transferred to another facility. This writer reminded her that Psychology will continue to work with her during her placement on watch to prefer for her transfer to SHU and the steps that occur thereafter including her DHO hearing.

Recommendations

Suicide watch will continue and he will be monitored daily.

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current

Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current

Cannabis Use Disorder, Severe, F12.20*b - Current

Gender Dysphoria In Adolescents And Adults, F64.1 - Current

Posttraumatic Stress Disorder, F43.10 - Current

Borderline Personality Disorder, F60.3 - Current

Other Specified Personality Disorder, F60.89 - Current

Completed by Bell, A. Psy.D. on 05/19/2020 16:04

Inmate Name:	SOUTH, JASON ROBERT			Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M	Facility:	FTD
Date:	05/19/2020 08:32	Provider:	Bell, A. Psy.D.	Unit Team:	UNIT 1

was informed that she will be stepped back down to ambulatory restraints next before full restraint removal. She verbally expressed understanding. This writer indicated that they would check in with IM SOUTH in a little bit and encouraged her to continue to take deep breaths and calm herself down.

Changes Since Last Contact

As noted in the General Admin note on this date, IM SOUTH was placed in ambulatory restraints on 5/18/2020 at 10:50pm. The log book indicates that she had been compliant with the restraint process and had appeared to have been resting the remainder of the night.

Recommendations

Suicide watch will continue and she will be monitored by Psychology daily and by custody staff in accordance with restraint policy.

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current

Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current

Cannabis Use Disorder, Severe, F12.20*b - Current

Gender Dysphoria In Adolescents And Adults, F64.1 - Current

Posttraumatic Stress Disorder, F43.10 - Current

Borderline Personality Disorder, F60.3 - Current

Other Specified Personality Disorder, F60.89 - Current

Completed by Bell, A. Psy.D. on 05/19/2020 15:52

**Bureau of Prisons
Psychology Services
Suicide Watch Contact**

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M	Facility: FTD
Date: 05/19/2020 08:32	Provider: Bell, A. Psy.D.	Unit Team: UNIT 1

Observations

Upon arrival to the institution at approximately 7:00am, this writer was greeted by the Operations LT. The LT updated this writer on the current status of IM SOUTH to include her current placement in ambulatory restraints and her full cooperation at this time. The LT indicated that they checked on IM SOUTH at approximately 6:00am at which time IM SOUTH was apologetic and calm. The LT indicated that she was planning to gradually remove the restraints if she continues this behavior. The Chief Psychologist and Capitan arrived during this conversation and a consultation occurred. The Capitan indicated that he wanted to inform IM SOUTH that she will be placed in SHU after the termination of her suicide watch as she received several 200 series incident reports. Psychology staff agreed that it would be appropriate to inform her of this while she is still on suicide watch as she may have an adverse reaction to this news. The Capitan indicated that he wanted to tell her right now while she is in restraints. This writer and the Chief Psychologist accompanied the Capitan to the suicide watch area and were present while the Capitan informed IM SOUTH of her incident reports and placement in SHU. Specifically he noted that IM SOUTH was receiving an incident report for threatening staff, which IM SOUTH denied. IM SOUTH appeared to be frustrated and upset by the news and expressed several times that she did not threaten staff. She indicated that she believed staff lied about her behavior and "made up" the incident report. She noted that if placed in SHU, she would hang herself. This writer expressed the desire to work with IM SOUTH regarding tolerating this news and accepting the consequences of her actions. The Captain indicated that if IM SOUTH's behavior escalates further, he would place her in four point restraints. IM SOUTH was yelling at staff indicating that she was not "playing games" and that she did have intention to kill herself. She looked at the Capitan and said "Epstein" and noted that all of the staff present would be responsible for her death. This writer informed IM SOUTH that staff were taking her statements seriously and that is why she is placed on suicide watch in ambulatory restraints. At this time, staff exited the suicide watch area in order to reduce stimuli and allow IM SOUTH to potentially calm down.

Several minutes later, the suicide watch officer called for assistance in the suicide watch area. IM SOUTH had engaged in head banging behavior which broke the skin and was bleeding. The staff gave verbal commands for IM SOUTH to stop engaging in self-harming behavior and she did not comply. At this time the Capitan, Lt, suicide watch officer, health services staff, and this writer went into the cell to prevent IM SOUTH was harming herself. Custody staff indicated that they were going to place her in four point restraints and additional staff arrived in order to physically restrain her until the restraints arrived. This writer stood in the cell and attempted to speak with IM SOUTH and provide redirection and positive reinforcement for her cooperative behavior at times. IM SOUTH was observed to be physically compliant with the restraint process, although she was yelling, tearful, and visibly upset throughout. She was observed to yelling about her desire to die and lack of reasons to live, including her discomfort of living in her body, her perceived staff interference with her gender transition, her belief that staff wanted her to be raped by "Hispanic" males (she appeared to be referring to a previous assault that occurred prior to her transfer to FTD), her concern that staff shared her PREA allegations with other inmates, and her belief that staff did not want to keep her safe. IM remained focused on her concern that staff "made up" her incident report as she believe she did not threaten anyone. Additionally, she reported concern that she had not taken her medications in several days. During the restraint process this writer attempted to console her by providing reminders that staff do care about her safety and that is the reason for the actions that were taking place. This writer reminded IM SOUTH of the progress that she has made over the past several months as well. This writer reminded IM SOUTH that she would be able to provide her statement regarding her incident reports when the incident report is processed by the DHO. This writer reminded her of her rights in that process. This writer indicated that staff are currently more concerned about her safety and overall well being. Throughout this process, this writer provided positive verbal reinforcement for her physical cooperation with the restraints.

Once the restraints were applied, IM SOUTH appeared to have calmed down as she was no longer yelling or crying. Medical staff assessed her head as she appeared to have blood and swelling. She was compliant with the process. She apologized to the Capitan and continued to express that she did not threaten staff. The Capitan indicated understanding of her emotional distress and indicated that he would like to see her continue her calm mood. She was informed that the restraints will be evaluated regularly in accordance with policy and that her behavior will determine the next steps. She

**Bureau of Prisons
Psychology Services
Suicide Watch Contact**

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M Facility: FTD	Unit Team: UNIT 1
Date: 05/18/2020 16:35	Provider: Bell, A. Psy.D.	

Observations

This writer was called by the suicide watch officer at approximately 4:20pm as was asked to present to the suicide watch area. Upon arrival to the suicide watch area the officer requested an update regarding IM SOUTH to better understand the events that lead to her placement on suicide watch. When this writer arrived to the cell area, IM SOUTH was sitting on the mattress facing the back mesh wall. While speaking with the suicide watch officer, this writer observed IM SOUTH get up from the mattress and appeared to be crouched down by the mesh wall. This writer asked IM SOUTH what she was doing at which point she stood up and did not say anything. This writer observed what appeared to be superficial lacerations on her right wrist and later observed blood on her hand. This writer also observed a small dime sized hole in the mesh wall near the spot where IM SOUTH was standing. This writer again asked IM SOUTH what she was doing and she replied that she was "sorry." She was told to report to the front of the suicide watch cell where this writer and the observer were location, which she complied. This writer asked if she was cutting herself on the mesh wall and she nodded her head. She indicated that she was feeling depressed, had self-harming ideation, and decided to act on them. She continued to apologize for her behavior. This writer expressed concern about her safety and indicated that this writer was going to request that she be switch to the other suicide watch cell. She nodded in response. This writer checked the mesh wall of the other suicide watch cell and did not observe any holes or loose wires.

Inmate appeared alert and oriented. She reported her mood as "depressed" and her affect matched. She presented as calm. Her rate and tone of speech were within normal limits although she did not verbally communicate more than a few words with this writer. No delusional thinking or hallucinatory experiences were overtly evident in her presentation.

Recommendations

This writer consulted with the Operations LT and it recommended that IM SOUTH be moved to the other suicide watch cell. The Lt took the recommendation and moved IM SOUTH. Suicide watch will continue and she will be monitored daily.

This writer will contact facilities staff in order to address the hole in in the mesh wall.

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current

Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current

Cannabis Use Disorder, Severe, F12.20*b - Current

Posttraumatic Stress Disorder, F43.10 - Current

Borderline Personality Disorder, F60.3 - Current

Other Specified Personality Disorder, F60.89 - Current

Completed by Bell, A. Psy.D. on 05/19/2020 11:04

**Bureau of Prisons
Psychology Services
General Administrative Note**

****SENSITIVE BUT UNCLASSIFIED****

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M	Unit Team: UNIT 1
Date: 05/19/2020 08:32	Facility: FTD	
	Provider: Bell, A. Psy.D.	

Comments

This writer, the on duty Psychologist, was contacted at approximately 10:34pm by the Operations Lt. This writer was informed that IM SOUTH was scratching her arm on the corner of the concrete block in suicide watch. The LT indicated that IM SOUTH was requesting her self-carry medication from her locker and noted that if she does not get her medication, specifically her hormones and psychiatric medications, she will continue to engage in self-harming behavior. The LT indicated that IM SOUTH was presenting in a calm manner at this time. He indicated that he was considering the use of restraints in order to prevent IM SOUTH from continuing to engage in self-harming behaviors.

Upon arrival into the institution on this date, this writer was made aware that IM SOUTH was placed in ambulatory restraints at 10:50pm. This writer was additionally made aware that IM SOUTH also engaged in head banging in addition to attempting to cut her wrist on the corner of the bed.

Completed by Bell, A. Psy.D. on 05/19/2020 11:40

Inmate Name: SOUTH, JASON ROBERT
 Date of Birth: 09/11/1978 Sex: M Facility: FTD
 Date: 05/18/2020 16:01 Provider: Bell, A. Psy.D.

Reg #: 57903-019
 Unit Team: UNIT 1

According to SRA (dated 5/25/18):

Inmate SOUTH states he was sexually victimized by a staff member at another federal correctional facility. Documents suggest this information was reported and PREA protocol was followed. Since the alleged incident, Inmate SOUTH has requested treatment for trauma-related illness.

Mental Health History

Inmate SOUTH is currently designated Care 2-MH which is consistent with the DCLF dated 1/14/20.

According to SRA (dated 5/25/18):

The PSI contains the following mental health history: "Records from the Georgia Department of Human Resources (DHR) indicate that in May 1991, at the age of 12, the defendant was referred to Northside Hospital in Atlanta, Georgia, for a psychological evaluation [see "Educational History," above]... An evaluation completed by Debbie Fruedenthal, M.A., and James Mullins, Ph.D., indicates the defendant was 'experiencing numerous difficulties, particularly in the area of conduct disorders, depression, and anxiety.' The defendant was depressed, angry, anxious and acting out his anger with little insight or judgment, often blaming others for his behavior... Shortly after the psychological evaluation was completed, the defendant was admitted to an inpatient treatment program at Northside Hospital after he expressed suicidal ideation and began cutting and carving on his arm. The defendant attributed his behavior to being suspended from school again and feeling that his friends were angry at him. The defendant was diagnosed with 'Major Depression and Conduct Disorder' (DSM III). The defendant was placed on antidepressant medication to alleviate some of his depression and decrease mood swings... A psychoeducational report from the Fulton County, Georgia School System, dated August 1991, indicates the defendant was referred for an evaluation to determine his eligibility for placement in the Behavior Disorders Program. The defendant was described as inattentive during group discussion and having trouble maintaining concentration and completing assignments. It was also noted that the defendant was often involved in verbal and physical altercations with his peers, and often responded in a defiant manner when confronted regarding his behavior. The defendant's intellectual functioning was found to be in the high-average concentration with a Full Scale IQ of 115; however, a significant discrepancy was observed between the defendant's verbal and performance IQ's, suggesting that while the defendant has superior intellectual potential, he has difficulty demonstrating this in the verbal expressive modality... The defendant self-reported trouble controlling his temper and complying with class structure and routine. The defendant also reported being argumentative with his peers. Contact with the defendant's private psychologist indicated the defendant recently completed social/emotional testing and there was evidence of depression and conduct difficulties... The defendant denied any history of psychosis, including auditory or visual hallucinations, or recent suicidal ideation. The defendant attributed his mental/emotional problems during adolescence to his mother being an alcoholic... The defendant is currently being treated for anxiety..."

While in the BOP, Inmate SOUTH has been housed at seven institutions, and had nearly 150 contacts with mental health services per his request. He has previously been diagnosed with panic disorder, agoraphobia, panic disorder without agoraphobia, depressive disorder NOS, major depressive disorder, antisocial personality disorder, and personality disorder. His medication history includes Xanax, Celexa and Zoloft.

Regarding treatment programs, Inmate SOUTH completed Drug Education in 2009, was expelled from Challenge in 2010 (see note 12/20/2010), expelled from NR DAP in 2011, withdrew from Mindfulness Based Cognitive Therapy in 2013, and was withdrawn from Anger Management in 2017 (did not present with ID and failed to make the move). Treatment summaries and individual therapy records indicate several maladaptive patterns of behavior including, "avoidance of responsibility," blaming others, "entitlement issues" and demandingness. The Challenge expulsion note (2010) indicated that he was proactive in getting needs met and he demonstrated coping skills to utilize when experiencing unpleasant emotions. The clinician surmised that he had "minimal change - he continues to accept responsibility for his behaviors, has involvement in criminal activity, struggles with being open-minded, humility, accepting negative feedback, and has entitlement issues." He was FRP refuse and was non-compliant with treatment. The NR DAP expulsion note (2011) indicated that he had "limited insight, mollification, absences and less committed compared to peers." He was ultimately coded as NR FAIL due to non-compliance.

In individual therapy, records show clinicians have worked with Inmate SOUTH using cognitive behavioral modes of treatment. CBT based coping skills, anxiety and anger management, and DBT skills (reality acceptance and distress tolerance) were taught. PDS records show he appeared to intermittently benefit from treatment, as well as patterns of

**Bureau of Prisons
Psychology Services
Suicide Risk Assessment**

****SENSITIVE BUT UNCLASSIFIED****

Inmate Name: SOUTH, JASON ROBERT
 Date of Birth: 09/11/1978 Sex: M Facility: FTD
 Date: 05/18/2020 16:01 Provider: Bell, A. Psy.D.

Reg #: 57903-019
 Unit Team: UNIT 1

Type of Housing: General Population
Cell Accommodation: Open Unit

Description of Suicide Related Behaviors

The inmate engaged in a Suicide Attempt without Injuries, a nonfatal, self-inflicted, potentially injurious behavior with at least some intent to die as a result of the behavior, which did not result in injury.

The lethality of this behavior was assessed to be Low.

Method of self harm or suicide attempt: Cutting attempted to stab right thigh with a mechanical pencil

Findings

This assessment and the resulting recommendations are based on the following sources of information:
 Clinical Interview, Presentence Report, Psychology Data System, Staff Interviews

IM SOUTH is currently in the transition process from male to female. Information from older records uses male pronouns but this writer will utilize female pronouns.

Reason for Referral

IM SOUTH was referred to psychology on 05/19/20 at approximately 2:30pm by her housing unit manager. The unit manager requested that this writer present to the housing unit as IM SOUTH was "acting out." This writer presented to the unit immediately and located IM SOUTH in her room with the unit manager and unit team staff. IM SOUTH reported feeling frustrated and the unit manager reported that IM SOUTH was "throwing a fit" and that she needed to get out of the unit. At that time, compound officers, SIS Lt, and Operations Lt arrived to the unit and escorted her from the unit. On the way out of the unit, IM SOUTH requested that she be able to fill her water bottle with water, which was denied. She proceeded to throw her water bottle on the ground, which landed near the compound officer who was opening the unit door at that time. IM SOUTH was escorted to the Lts complex. While being escorted, this writer spoke with unit team staff who reported that IM SOUTH appeared to have a disagreement with another inmate and then became verbally aggressive. Unit team staff reported that she was using the "n" word and shouting and slamming doors while she walked from the unit team area to her room. Unit team staff reported concern for IM SOUTH's safety as several inmates in the housing unit were upset by her reported use of racial slurs. This writer was then called to the Lts complex to speak with IM SOUTH.

Developmental History

According to SRA (dated 5/25/18):

Inmate SOUTH describes his childhood as "traumatic and unstable." He was raised by his mother, as his father was killed in an automobile accident five months prior to his birth. His mother was an alcohol abuser; he stated she never provided a stable home environment, and she ultimately passed away due to "cardiac arrest by withdrawal from alcohol." From age 10 to 14, Inmate SOUTH lived with his mother, who frequently threatened to send him to the foster system due to his behavioral problems. He lived with various friends at age 14, and then in his own apartment beginning at age 15, when he dropped out of high school and began working at Pizza Hut.

Educational History/Cognitive Impairment

According to SRA (dated 5/25/18):

Inmate SOUTH was expelled from fifth grade due to "behavior problems." In six grade at a new school, Inmate SOUTH's school requested a psychological evaluation in response to his display of behavioral problems resulting in multiple suspensions. Per the PSI, Inmate SOUTH participated in "stealing, fighting, skipping school and being destructive." The evaluation included the recommendation he be placed in an intensive therapeutic program where he could complete his middle school studies.

After completing middle school by way of the Outdoor Therapeutic Program (OTP), a wilderness immersion program for behaviorally disordered youth, Inmate SOUTH entered high school. He withdrew prior to completion of ninth grade.

Arrest History and Experience of Incarceration

Inmate Name:	SOUTH, JASON ROBERT			Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M	Facility:	FTD
Date:	05/18/2020 16:01	Provider:	Bell, A. Psy.D.	Unit Team:	UNIT 1

stated that she was not going to SHU, but rather suicide watch. As she made that statement so took the mechanical pencil that she appeared to have in her pocket, raised her fist and appeared to prepare to stab herself in the leg. She made the hand movement down towards her thigh but Operations staff yelled for her to stop and prevented her from doing so. There were no visible marks on her leg. At that point, the Operations Lt indicated that she was going to be placed on suicide watch. Compound staff placed in her hand restraints and she was escorted to the suicide watch cell.

Upon arrival to the suicide watch cell she indicated that she would not be compliant with a male visual search, although at this time she is not approved for female only visual searches. The Operations Lt was female and requested that the female nurse assist with the visual search in order to deescalate the situation IM SOUTH.

Once secured in the suicide watch cell, IM SOUTH continued to yell and express frustration regarding her current placement and the possible placement in SHU. She indicated that if placed in SHU she would "hang" herself. She expressed suicidal ideation and intention, noting that she "does not want to live like this." She expressed a desire for her male genitals to be "cut off" of her body. IM SOUTH requested to speak with her unit manager, whom she was previously reported a positive relationship with, as her believed that her unit manager was now "against [her]." She also made statements regarding not having reasons to live and expressed fear that no one cares about her. She indicated that she believes that staff are trying to prevent her from transitioning to a female as they were not approving her requests.

The Psychiatrist and female nurse were present at the cell in order to assist in deescalating her and offered a prn medication. Initially she denied the medication and continued to report hopelessness and a desire to die. She was observed to be pacing around the cell and crying. During this time she was observed to hang her head once on the back wall of the suicide watch cell which resulted in minor bleeding. She also took the suicide watch blanket, tied it around her neck, and attempted to tighten it. She was unable to tighten the blanket and subsequently took it off her neck. She also removed her suicide watch smock and threw it across the room. She eventually put it back on and agreed to take the medication that was offered by medical.

At this point IM SOUTH appeared to be calming down and was given a 4mg injection of Ativan. She spoke with this writer regarding her emotional state and noted feeling hopeless regarding the current situation but indicated that she wanted to react differently. She briefly utilized a chain analysis to process the events leading up to this moment that may have contributed to her behavior to include her missing dosages of her anti-depressant and hormones. She indicated that she has been impacted by the current lockdown due to the COVID-19 crisis. She also continued to report frustration regarding her transition process and the discomfort that she feels in her body. additionally, she noted that the arrival of the compound and Lts to her building contributed to her feeling frustrated and escalated her behavior. She apologized to this writer and expressed a willingness to engage in continued treatment.

Current Mental Status

Level of Consciousness: Alert and Oriented

Psychomotor Activity: Restless

General Appearance: Normal

Behavior: Agitated

Mood: Labile

Thought Process: Goal Directed

Thought Content: Normal

Risk and Protective Factors Assessed

This writer screened the inmate for a variety of empirically validated factors commonly associated with risk for self-harm and suicide.

The following **STATIC** risk factors were assessed to be present and increase the inmate's risk for engaging in suicide related behaviors: History of childhood abuse (physical or sexual), History of inpatient psychiatric treatment, History of mental illness, History of self-injury or suicide attempt, History of violent behavior

Inmate Name: SOUTH, JASON ROBERT
 Date of Birth: 09/11/1978 Sex: M Facility: FTD
 Date: 05/18/2020 16:01 Provider: Bell, A. Psy.D.

Reg #: 57903-019
 Unit Team: UNIT 1

non-compliance with assigned homework/ treatment interventions, inability or unwillingness to apply acquired skills, repeated cop-outs expressing the need for services followed by a dissatisfaction with services offered or perceived needs not being met and missed appointments.

In June 2017, Inmate SOUTH first requested institutional transfer to FCI Danbury to participate in the Resolve Program. A referral was formally made by FCI Phoenix to FCI Danbury. Between 07-03-2017 and 08-30-2017 while awaiting response, he submitted 32 cop outs inquiring as to the status of this referral. He was advised he had been denied program transfer by FCI Danbury on 08-30-2017; the following day, he submitted an additional cop out stating he had contacted an attorney and no longer wished to receive psychological services at this facility.

In January 2018, however, Inmate SOUTH submitted a cop out requesting to be seen for treatment again. He was assigned to a new provider (this writer), and in the last four months has been seen for five clinical contacts. After the third of these five contacts, he was provided a psychotropic medication referral, as well as psychoeducation that despite evidence-based treatment interventions his severe symptoms were not improving. He failed to attend the appointment. One month later he returned endorsing still worsening symptoms; he was again referred to Health Services for an evaluation. Upon being seen, he declined to initiate a medication regimen, instead stating he wanted an MRI to "rule out anything medical." The physician informed him findings of an MRI would not change his recommendations regarding psychotropic medication, but the inmate again declined.

In February 2018, Inmate SOUTH requested to be reconsidered for FCI Danbury's Resolve Program. The Resolve Coordinator and Chief Psychologist again advised FCI Phoenix Inmate SOUTH would not be transferred for that program at that time. In April 2018, he filed a BP-8 stating he had been "wrongfully denied" treatment. He was advised of the rationale and provided ample treatment options at his local institution. In May 2018, he submitted a BP-9, reiterating "wrongful denial" of treatment and requesting to be provided the rationale in writing. He was again provided comprehensive rationale after consultation with the denying institution and Central Office, as well as an abundance of treatment options available to him at this facility. He was again referred to sick call to discuss medical interventions for symptom management, and again failed to report. When he presented to Psychology Services today for a scheduled clinical contact, he described his symptoms as continuing to worsen in severity and intensity, and expressed a sense of helplessness to improve his circumstances.

Self-Harm History

According to SRA (dated 5/25/18):

Inmate SOUTH had a remote history of suicidal ideation and suicidal gestures during his teenage years which was documented in his PSR; however, prior to his statement today, he has not demonstrated any suicidal ideation or behaviors in adulthood and since incarceration.

Substance Abuse History

According to SRA (dated 5/25/18):

Per his report today, and substantiated by his PSI, Inmate SOUTH has a substantial history of marijuana and alcohol use, beginning at age 13 until the time of his arrest for the instant offense. He denied a history of stimulant use, stating he used cocaine "a couple of times," but learned he only likes "downers."

Medical Concerns

According to SRA (dated 5/25/18):

In March 2019, Inmate SOUTH reported he was "hit in the head" with a "mallet" by an officer conducted bar taps in the unit. The inmate stated he was asleep in his bunk when the incident occurred, and stated he was unsure whether it was done intentionally. He stated subsequent to this incident he "saw some stars" and began experiencing dizziness, weakness, blurry vision, headaches, feeling "woozy," "heavy eyes, like if you had your eyes crossed for too long" and posterior cervical pain. An evaluation was ordered to rule out intracerebral trauma. Findings of that evaluation, including a CT scan of head and cervical spine, were returned with negative results.

Current Problem

When this writer arrived to the Lts complex, this writer found IM SOUTH sitting in the Operations Lt's office crying with the Lt. This writer asked IM SOUTH what was wrong and she explained that she was upset by an interaction that she had and did not fully recall the events. The Operations Lt explained that she just spoke with the unit manager and was informed that IM SOUTH was going to receive incident reports and will be sent to SHU. At hearing this news, IM SOUTH

Inmate Name:	SOUTH, JASON ROBERT			Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M	Facility:	FTD
Date:	05/18/2020 16:01	Provider:	Bell, A. Psy.D.	Unit Team:	UNIT 1

The following **DYNAMIC** risk factors were assessed to be present and increase the inmate's risk for engaging in suicide related behaviors: Agitation, Current suicidal ideation, Current suicidal intention, Current suicidal plan, Feeling hopeless/helpless, Non-compliance with treatment recommendations, Problem solving deficits

The following **PROTECTIVE** factors were assessed to be present and may decrease the inmate's risk of suicide: Social support in the institution, Supportive family relationships

Regarding static risk factors, IM SOUTH has a history of suicide, mental illness, inpatient hospitalization, childhood abuse, and a violent history.

Regarding dynamic risk factors for suicide, IM SOUTH indicated that she does have suicidal ideation, intention, and plans if she is placed in SHU. She reported feelings of hopelessness as well. She also reported feeling agitated and appeared to have problem solving deficits. She reported a willingness to engage in treatment at the end of this assessment although her reports of not taking her prescribed medications is evidence of treatment noncompliance.

Regarding protective factors against suicide, IM SOUTH fluctuated on her reasons to live and future orientation. She does have perceived supports within the institution and supportive family relationships.

Diagnosis

Alcohol Use Disorder: Severe, F10.20*b - Current
 Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current
 Cannabis Use Disorder, Severe, F12.20*b - Current
 Gender Dysphoria In Adolescents And Adults, F64.1 - Current
 Posttraumatic Stress Disorder, F43.10 - Current
 Borderline Personality Disorder, F60.3 - Current
 Other Specified Personality Disorder, F60.89 - Current

Conclusions

The Overall Acute Suicide Risk for this Inmate is: Moderate
 Overall Chronic Suicide Risk for this Inmate is: Absent

Recommendations

This writer received a call from IM SOUTH's unit manager reported concerning behavior of IM SOUTH in the unit. IM SOUTH was taken to the Lts complex where she engaged in a reported suicide attempt by attempting to strike herself in the thigh with a mechanical pencil after being informed that she was receiving an incident report and being placed in SHU. She was immediately placed on suicide watch where she continued to engage in suicidal behavior via head banging and attempted asphyxiation.

After consideration of the information gathered, the risk factors for suicide outweigh any protective factors present. Specifically her suicidal behavior, reported hopelessness, and denial of reasons to live. Placement on Suicide Watch appears to be warranted at this time.

Recommendations:

1. Suicide Watch will be initiated immediately.
2. During daily suicide watch contacts coping skills, specifically distress tolerance, and goals for living should be discussed.

Suicide Watch: A suicide watch is to be initiated immediately

Completed by Bell, A. Psy.D. on 05/19/2020 13:46

**Bureau of Prisons
Psychology Services
Administrative Contact with an Inmate**

****SENSITIVE BUT UNCLASSIFIED****

Inmate Name:	SOUTH, JASON ROBERT	Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M
		Facility:	FTD
Date:	05/13/2020 10:45	Unit Team:	UNIT 1
		Provider:	Bell, A. Psy.D.

Comments

IM South was provided with Playaway on Mindfulness/Meditation. See attached rental agreement.

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current

Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current

Cannabis Use Disorder, Severe, F12.20*b - Current

Gender Dysphoria In Adolescents And Adults, F64.1 - Current

Posttraumatic Stress Disorder, F43.10 - Current

Borderline Personality Disorder, F60.3 - Current

Other Specified Personality Disorder, F60.89 - Current

Completed by Bell, A. Psy.D. on 05/13/2020 15:12

Bureau of Prisons
Psychology Services
Clinical Intervention - Clinical Contact

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M	Facility: FTD
Date: 05/04/2020 10:09	Provider: Bell, A. Psy.D.	Unit Team: UNIT 1

Focus of Session

Inmate SOUTH has been identified as a CARE2-MH inmate on the basis of her mental health diagnosis of Bipolar I Disorder, Posttraumatic Stress Disorder, Borderline Personality Disorder, Other Specified Personality Disorder, and Gender Dysphoria in Adolescents and Adults and need for services. Inmate SOUTH is being seen at least monthly to address mental health and adjustment issues.

IM SOUTH reported that she has continued to feel balanced and has utilized her coping skills since her last session. She indicated her sleep and appetite have been within normal limits. IM SOUTH is currently prescribed Cymbalta and Remeron (self-carry) and Lamictal. A review of BEMR indicates IM SOUTH is compliant with medication. IM SOUTH endorsed clinically significant symptoms of any mood, anxiety or thought disorder at this time. IM SOUTH denied having thoughts of suicide or homicide. IM SOUTH currently works in Yard AM, a job she reportedly enjoys. IM SOUTH reports she does speak to her social supports on the phone regularly. IM SOUTH indicated she feels safe on the compound and denied having any identifiable threat to her safety at this time.

Subjective/Objective Presentation

IM SOUTH presented as alert and oriented in all spheres. IM 's mood appeared euthymic and affect matched. IM SOUTH maintained appropriate eye contact and her rate and tone of speech were within normal limits. There was no evidence of thought or perceptual disturbances at this time.

Intervention(s)

Supportive counseling was provided and coping skills were reviewed. The importance of medication compliance was discussed. In addition, the following interventions relevant to his treatment goals were utilized:

- Complete Basic Cognitive Skills
- Use RSAs to effectively manage mood and anxiety symptoms
- Learn and review DBT skills

Specifically, IM SOUTH reported the continued use of medications which she believes has been helping her feel "balanced." She noted that she has been using RSA and chain analysis in order to better understand her emotional responses.

Progress/Plan

IM SOUTH will continued to be engaged in treatment activities related to his treatment plan on at least a monthly basis in accordance with Care 2-MH policy. Frequency may increase due to presenting problems, symptoms, and/or clinician's judgment. IM SOUTH was reminded how he may contact Psychology Services in the event of an emergency.

Completed by Bell, A. Psy.D. on 05/06/2020 10:16

Bureau of Prisons
Psychology Services
Administrative Contact with an Inmate

SENSITIVE BUT UNCLASSIFIED

Inmate Name:	SOUTH, JASON ROBERT	Sex:	M	Facility:	FTD	Reg #:	57903-019	
Date of Birth:	09/11/1978	Provider:	Bell, A. Psy.D.	Unit Team:	UNIT 1			
Date:	04/27/2020 10:01							

Comments

IM SOUTH was provided with a Playaway on creating positive change. See attached rental agreement.

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current

Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current

Cannabis Use Disorder, Severe, F12.20*b - Current

Gender Dysphoria In Adolescents And Adults, F64.1 - Current

Posttraumatic Stress Disorder, F43.10 - Current

Borderline Personality Disorder, F60.3 - Current

Other Specified Personality Disorder, F60.89 - Current

Completed by Bell, A. Psy.D. on 04/27/2020 12:17

Bureau of Prisons
Psychology Services
Clinical Intervention - Clinical Contact

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M	Facility: FTD
Date: 04/22/2020 10:14	Provider: Bell, A. Psy.D.	Unit Team: UNIT 1

Focus of Session

Inmate SOUTH has been identified as a CARE2-MH inmate on the basis of her mental health diagnosis of Bipolar I Disorder, Posttraumatic Stress Disorder, Borderline Personality Disorder, Other Specified Personality Disorder, and Gender Dysphoria in Adolescents and Adults and need for services. Inmate SOUTH is being seen at least monthly to address mental health and adjustment issues.

IM SOUTH reported overall decrease in symptoms and positive use of coping skill since her last session. She indicated her sleep and appetite have been within normal limits. IM SOUTH is currently prescribed Cymbalta and Remeron (self-carry) and Lamictal. A review of BEMR indicates IM SOUTH is compliant with medication. IM SOUTH denied clinically significant symptoms of any mood, anxiety or thought disorder at this time. IM SOUTH denied having thoughts of suicide or homicide. IM SOUTH currently works in Yard AM, a job she reportedly enjoys. IM SOUTH reports she does speak to her social supports on the phone regularly. IM SOUTH indicated she feels safe on the compound and denied having any identifiable threat to her safety at this time.

Subjective/Objective Presentation

IM SOUTH presented as alert and oriented in all spheres. IM 's mood appeared happy and affect matched. IM SOUTH maintained appropriate eye contact and her rate and tone of speech were within normal limits. There was no evidence of thought or perceptual disturbances at this time.

Intervention(s)

Supportive counseling was provided and coping skills were reviewed. The importance of medication compliance was discussed. In addition, the following interventions relevant to his treatment goals were utilized:

- Complete Basic Cognitive Skills
- Use RSAs to effectively manage mood and anxiety symptoms
- Learn and review DBT skills

Specifically, IM SOUTH reviewed her use of RSAs in session regarding situations where she became angry/frustrated. She recognized in one situation that she believed unit team staff were being dismissive of her when they were likely "just busy." She indicated that she has a pattern of interpreting others actions as personal, even when they are not. She noted positive impacts from her use of RSAs to include her ability to recognize certain patterns and respond to similar situations differently. She noted that she believes her medication is helping her slow down her responses in order to utilize rational thinking. She added that when she is able to look at something objectively and allow herself time to process before reacting, she will typically feel less overwhelmed or bothered by the situation. This provided verbal praise of IM SOUTH's use of coping skills and engagement in treatment. In this session, this writer introduced the use of Behavior Chain Analysis as an additional tool to examine her problematic behaviors. This writer reviewed an example chain analysis and encouraged IM SOUTH to utilize them in connection with her use of RSAs. Lastly this writer introduced the TIP skill to IM SOUTH, who indicated that she already utilizes some of these techniques.

Progress/Plan

IM SOUTH will continued to be engaged in treatment activities related to her treatment plan on at least a monthly basis in accordance with Care 2-MH policy. Frequency may increase due to presenting problems, symptoms, and/or clinician's judgment. IM SOUTH was reminded how she may contact Psychology Services in the event of an emergency.

Diagnosis:

- Alcohol Use Disorder: Severe, F10.20*b - Current
- Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current
- Cannabis Use Disorder, Severe, F12.20*b - Current
- Posttraumatic Stress Disorder, F43.10 - Current
- Borderline Personality Disorder, F60.3 - Current

Inmate Name:	SOUTH, JASON ROBERT	Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M
		Facility:	FTD
Date:	04/22/2020 10:14	Provider:	Bell, A. Psy.D.
		Unit Team:	UNIT 1

Other Specified Personality Disorder, F60.89 - Current

Completed by Bell, A. Psy.D. on 04/23/2020 09:45

**Bureau of Prisons
Psychology Services
Administrative Contact with an Inmate**

****SENSITIVE BUT UNCLASSIFIED****

Inmate Name:	SOUTH, JASON ROBERT	Sex:	M.	Facility:	FTD	Reg #:	57903-019
Date of Birth:	09/11/1978	Provider:	Bell, A. Psy.D.	Unit Team:	UNIT 1		
Date:	04/17/2020 09:44						

Comments

IM SOUTH returned her Playaway in good condition.

Completed by Bell, A. Psy.D. on 04/17/2020 09:45

Reviewed by Marantz, Stacie PsyD/Chief Psychologist on 04/20/2020 10:52

****SENSITIVE BUT UNCLASSIFIED****

**Bureau of Prisons
Psychology Services
Administrative Contact with an Inmate**

Inmate Name:	SOUTH, JASON ROBERT			Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M	Facility:	FTD
Date:	04/15/2020 10:36	Provider:	Bell, A. Psy.D.		
Unit Team: UNIT 1					

Comments

This writer provided IM SOUTH with a Playaway device on the use of meditation in managing anxiety and panic. See attached rental agreement.

Completed by Bell, A. Psy.D. on 04/15/2020 12:47

Reviewed by Marantz, Stacie PsyD/Chief Psychologist on 04/15/2020 13:15

**Bureau of Prisons
Psychology Services
Clinical Intervention - Clinical Contact**

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M	Facility: FTD
Date: 04/14/2020 09:35	Provider: Gomez, D. PsyD, NR DAPC	Unit Team: UNIT 1

Focus of Session

Inmate South was seen for a follow up to yesterday's Suicide Risk Assessment on this date. She was seen by this writer in her housing unit during Covid-19 rounds.

Subjective/Objective Presentation

Inmate South was alert and fully oriented. She presented with euthymic mood and affect. She denied any experience of distress at this time. She stated, "no I'm doing better. I ate some dinner yesterday and I'm planning on eating lunch later." Inmate South denied any form of suicidal thinking or hopelessness since her SRA yesterday.

Intervention(s)

Inmate South requested access to another self help playaway.

Progress/Plan

This department will provide her with a playaway during our next rounds.

Completed by Gomez, D. PsyD, NR DAPC on 04/14/2020 10:24

**Bureau of Prisons
Psychology Services
Suicide Risk Assessment**

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M Facility: FTD	Unit Team: UNIT 1
Date: 04/13/2020 15:38	Provider: Bell, A. Psy.D.	

Type of Housing: General Population**Cell Accommodation:** Double-Cell**Findings**

This assessment and the resulting recommendations are based on the following sources of information:

Clinical Interview, Presentence Report, Psychology Data System, Staff Interviews

IM SOUTH is currently in the transition process from male to female. Information from older records uses male pronouns but this writer will utilize female pronouns.

Reason for Referral

IM SOUTH sent an email to unit team staff on 4/11/2020 at 11:05am that stated she had "not eaten in 48 hours now. nothing at all." This email was forwarded to this writer on 4/12/2020 at 10:55pm. Upon receipt of this email on 4/13/2020, this writer consulted with unit team and Religious Services, as her concern was related to her Passover meal. Then this writer went to speak with IM SOUTH to inquire about her food consumption and determine if she was declaring a hunger strike. During the course of this conversation, IM SOUTH reported that the only way she would eat again is if she were "unconscious." She also indicated that he had experience suicidal ideation over the past few days and had thought about going on suicide watch.

Developmental History

According to SRA (dated 5/25/18):

Inmate SOUTH describes his childhood as "traumatic and unstable." He was raised by his mother, as his father was killed in an automobile accident five months prior to his birth. His mother was an alcohol abuser; he stated she never provided a stable home environment, and she ultimately passed away due to "cardiac arrest by withdrawal from alcohol." From age 10 to 14, Inmate SOUTH lived with his mother, who frequently threatened to send him to the foster system due to his behavioral problems. He lived with various friends at age 14, and then in his own apartment beginning at age 15, when he dropped out of high school and began working at Pizza Hut.

Educational History/Cognitive Impairment

According to SRA (dated 5/25/18):

Inmate SOUTH was expelled from fifth grade due to "behavior problems." In sixth grade at a new school, Inmate SOUTH's school requested a psychological evaluation in response to his display of behavioral problems resulting in multiple suspensions. Per the PSI, Inmate SOUTH participated in "stealing, fighting, skipping school and being destructive." The evaluation included the recommendation he be placed in an intensive therapeutic program where he could complete his middle school studies.

After completing middle school by way of the Outdoor Therapeutic Program (OTP), a wilderness immersion program for behaviorally disordered youth, Inmate SOUTH entered high school. He withdrew prior to completion of ninth grade.

Arrest History and Experience of Incarceration

According to SRA (dated 5/25/18):

Inmate SOUTH states he was sexually victimized by a staff member at another federal correctional facility. Documents suggest this information was reported and PREA protocol was followed. Since the alleged incident, Inmate SOUTH has requested treatment for trauma-related illness.

Mental Health History

Inmate SOUTH is currently designated Care 2-MH which is consistent with the DCLF dated 1/14/20.

According to SRA (dated 5/25/18):

The PSI contains the following mental health history: "Records from the Georgia Department of Human Resources (DHR) indicate that in May 1991, at the age of 12, the defendant was referred to Northside Hospital in Atlanta, Georgia, for a psychological evaluation [see "Educational History," above]... An evaluation completed by Debbie Fruedenthal, M.A., and James Mullins, Ph.D., indicates the defendant was 'experiencing numerous difficulties, particularly in the area

Inmate Name:	SOUTH, JASON ROBERT			Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M	Facility:	FTD
Date:	04/13/2020 15:38	Provider:	Bell, A. Psy.D.		
				Unit Team:	UNIT 1

third of these five contacts, he was provided a psychotropic medication referral, as well as psychoeducation that despite evidence-based treatment interventions his severe symptoms were not improving. He failed to attend the appointment. One month later he returned endorsing still worsening symptoms; he was again referred to Health Services for an evaluation. Upon being seen, he declined to initiate a medication regimen, instead stating he wanted an MRI to "rule out anything medical." The physician informed him findings of an MRI would not change his recommendations regarding psychotropic medication, but the inmate again declined.

In February 2018, Inmate SOUTH requested to be reconsidered for FCI Danbury's Resolve Program. The Resolve Coordinator and Chief Psychologist again advised FCI Phoenix Inmate SOUTH would not be transferred for that program at that time. In April 2018, he filed a BP-8 stating he had been "wrongfully denied" treatment. He was advised of the rationale and provided ample treatment options at his local institution. In May 2018, he submitted a BP-9, reiterating "wrongful denial" of treatment and requesting to be provided the rationale in writing. He was again provided comprehensive rationale after consultation with the denying institution and Central Office, as well as an abundance of treatment options available to him at this facility. He was again referred to sick call to discuss medical interventions for symptom management, and again failed to report. When he presented to Psychology Services today for a scheduled clinical contact, he described his symptoms as continuing to worsen in severity and intensity, and expressed a sense of helplessness to improve his circumstances.

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Medical Concerns

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In March 2019, Inmate SOUTH reported he was "hit in the head" with a "mallet" by an officer conducted bar taps in the unit. The inmate stated he was asleep in his bunk when the incident occurred, and stated he was unsure whether it was done intentionally. He stated subsequent to this incident he "saw some stars" and began experiencing dizziness, weakness, blurry vision, headaches, feeling "woozy," "heavy eyes, like if you had your eyes crossed for too long" and posterior cervical pain. An evaluation was ordered to rule out intracerebral trauma. Findings of that evaluation, including a CT scan of head and cervical spine, were returned with negative results.

Current Problem

IM SOUTH indicated that she had been frustrated with food service and religious services because she did not obtain a vegan Passover meal. In consultation with the Chaplain, this writer determined that she had in fact not been provided with a vegan Passover meal and that an appropriate alternative had been discussed with her on 4/12/2020 to which she appeared satisfied. The Chaplain indicated that this was also verified with the Food Service Administrator. This writer shared this information with IM SOUTH and asked why she then had not been going to eat her meals. She noted that the situation was a trigger for her and that she did not want to create further stress by going to get her meals and therefore she was choosing not to eat. When asked what would need to happen for her to eat again, she reported that she would need to be "unconscious." It should be noted that in previous SRAs IM SOUTH has identified increased distress and suicidal ideation when things don't go the way she believes they should. IM SOUTH also noted that she felt that she was in a "good place" last week with her ability to cope with stress, communicate with her supports, and manage her day to day activities. Through this conversation, it was determined that she felt that all of her progress was null due to her experience of distress related to this incident and that this led her to feel hopeless. She noted that she experienced suicidal ideation and "thought about going on suicide watch." This writer acknowledged her frustrations and orientation towards managing her distress, but encouraged her to challenge her thinking errors that contributed to her viewing the situation in absolutes. For example, she noted that she believes that the staff did not care about her religious and dietary needs and therefore that is why she was not provided the vegan Passover meal. She was able to

Inmate Name: SOUTH, JASON ROBERT

Reg #: 57903-019

Date of Birth: 09/11/1978

Sex: M

Facility: FTD

Unit Team: UNIT 1

Date: 04/13/2020 15:38

Provider: Bell, A. Psy.D.

conduct disorders, depression, and anxiety.' The defendant was depressed, angry, anxious and acting out his anger with little insight or judgment, often blaming others for his behavior... Shortly after the psychological evaluation was completed, the defendant was admitted to an inpatient treatment program at Northside Hospital after he expressed suicidal ideation and began cutting and carving on his arm. The defendant attributed his behavior to being suspended from school again and feeling that his friends were angry at him. The defendant was diagnosed with 'Major Depression and Conduct Disorder' (DSM III). The defendant was placed on antidepressant medication to alleviate some of his depression and decrease mood swings... A psychoeducational report from the Fulton County, Georgia School System, dated August 1991, indicates the defendant was referred for an evaluation to determine his eligibility for placement in the Behavior Disorders Program. The defendant was described as inattentive during group discussion and having trouble maintaining concentration and completing assignments. It was also noted that the defendant was often involved in verbal and physical altercations with his peers, and often responded in a defiant manner when confronted regarding his behavior. The defendant's intellectual functioning was found to be in the high-average concentration with a Full Scale IQ of 115; however, a significant discrepancy was observed between the defendant's verbal and performance IQ's, suggesting that while the defendant has superior intellectual potential, he has difficulty demonstrating this in the verbal expressive modality... The defendant self-reported trouble controlling his temper and complying with class structure and routine. The defendant also reported being argumentative with his peers. Contact with the defendant's private psychologist indicated the defendant recently completed social/emotional testing and there was evidence of depression and conduct difficulties... The defendant denied any history of psychosis, including auditory or visual hallucinations, or recent suicidal ideation. The defendant attributed his mental/emotional problems during adolescence to his mother being an alcoholic... The defendant is currently being treated for anxiety..."

While in the BOP, Inmate SOUTH has been housed at seven institutions, and had nearly 150 contacts with mental health services per his request. He has previously been diagnosed with panic disorder, agoraphobia, panic disorder without agoraphobia, depressive disorder NOS, major depressive disorder, antisocial personality disorder, and personality disorder. His medication history includes Xanax, Celexa and Zoloft.

Regarding treatment programs, Inmate SOUTH completed Drug Education in 2009, was expelled from Challenge in 2010 (see note 12/20/2010), expelled from NR DAP in 2011, withdrew from Mindfulness Based Cognitive Therapy in 2013, and was withdrawn from Anger Management in 2017 (did not present with ID and failed to make the move). Treatment summaries and individual therapy records indicate several maladaptive patterns of behavior including, "avoidance of responsibility," blaming others, "entitlement issues" and demandingness. The Challenge expulsion note (2010) indicated that he was proactive in getting needs met and he demonstrated coping skills to utilize when experiencing unpleasant emotions. The clinician surmised that he had "minimal change - he continues to accept responsibility for his behaviors, has involvement in criminal activity, struggles with being open-minded, humility, accepting negative feedback, and has entitlement issues." He was FRP refuse and was non-compliant with treatment. The NR DAP expulsion note (2011) indicated that he had "limited insight, mollification, absences and less committed compared to peers." He was ultimately coded as NR FAIL due to non-compliance.

In individual therapy, records show clinicians have worked with Inmate SOUTH using cognitive behavioral modes of treatment. CBT based coping skills, anxiety and anger management, and DBT skills (reality acceptance and distress tolerance) were taught. PDS records show he appeared to intermittently benefit from treatment, as well as patterns of non-compliance with assigned homework/ treatment interventions, inability or unwillingness to apply acquired skills, repeated cop-outs expressing the need for services followed by a dissatisfaction with services offered or perceived needs not being met and missed appointments.

In June 2017, Inmate SOUTH first requested institutional transfer to FCI Danbury to participate in the Resolve Program. A referral was formally made by FCI Phoenix to FCI Danbury. Between 07-03-2017 and 08-30-2017 while awaiting response, he submitted 32 cop outs inquiring as to the status of this referral. He was advised he had been denied program transfer by FCI Danbury on 08-30-2017; the following day, he submitted an additional cop out stating he had contacted an attorney and no longer wished to receive psychological services at this facility.

In January 2018, however, Inmate SOUTH submitted a cop out requesting to be seen for treatment again. He was assigned to a new provider (this writer), and in the last four months has been seen for five clinical contacts. After the

Inmate Name:	SOUTH, JASON ROBERT			Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M	Facility:	FTD
Date:	04/13/2020 15:38	Provider:	Bell, A. Psy.D.		
				Unit Team:	UNIT 1

Borderline Personality Disorder, F60.3 - Current

Other Specified Personality Disorder, F60.89 - Current

Conclusions

The Overall Acute Suicide Risk for this Inmate is: Low

Overall Chronic Suicide Risk for this Inmate is: Absent

Recommendations

IM SOUTH sent an email to unit team staff on 4/11/2020 at 11:05am that stated she had "not eaten in 48 hours now. nothing at all." Upon receipt of this email on 4/13/2020, this writer consulted with unit team and Religious Services as her concern was related to her Passover meal. Then this writer went to speak with IM SOUTH to inquire about her food consumption and determine if she was declaring a hunger strike. During the course of this conversation, IM SOUTH reported that the only way she would eat again is if she were "unconscious." She also indicated that he had experience suicidal ideation over the past few days and had thought about going on suicide watch. IM SOUTH expressed insight into her thinking errors and identified that she was just feeling frustrated and that she did not have suicidal intention or plans at this time. As noted in previous SRA's, IM SOUTH experiences an increase in her suicidal ideation when she feels frustrated, when something does not go the way that she believes it should, and/or when something does not seem logical in her perspective.

After consideration of the information gathered, the protective factors for suicide outweigh the risk factors present. Specifically her current denial of suicidal intention and plan. She also reported reasons to live, is actively participating in treatment, and has perceived support inside and outside the institution. She reported that she will speak to any available staff if her symptoms increase or if she has suicidal intention or plan in order to receive appropriate services and interventions. Based on this writer's clinical opinion, and in consultation with the Chief Psychologist, the protective factors outweigh the above risk factors and therefore a suicide watch is not warranted.

Recommendations:

1. IM SOUTH will be maintained as a Care2-MH and will be seen in accordance with Care 2-MH policy.
2. Medication compliance should be monitored and continue to be encouraged.
3. IM SOUTH was reminded and understood how she may contact Psychology Services for emergent and non-emergent situations and agreed to do so if her symptoms increase. She was also reminded that Psychology Services conducts rounds on a daily basis on the units during the COVID-19 crisis.
4. IM SOUTH was encouraged to work on the Basic Cognitive Skills workbook that was previously provided to her. Specifically, she agreed to work on recognizing and challenging her thinking errors.
5. This writer also indicated that they would be able to provide a Playaway, as she previously requested, later in the week.
6. IM SOUTH was encouraged to eat something more substantial than a cracker or chip and she indicated that she would eat some of her commissary items tonight. This writer provided psychoeducation on the importance of a healthy diet and its impacts on mental health.

Suicide Watch: A suicide watch is not warranted at this time

Completed by Bell, A. Psy.D. on 04/14/2020 07:55

Inmate Name: SOUTH, JASON ROBERT
 Date of Birth: 09/11/1978 Sex: M Facility: FTD
 Date: 04/13/2020 15:38 Provider: Bell, A. Psy.D.

Reg #: 57903-019
 Unit Team: UNIT 1

challenge that thought and acknowledge that staff may be limited due to the COVID-19 pandemic or that they just made a mistake. She also challenged her thinking regarding her belief that her previous progress was null. Throughout this discussion, IM SOUTH reported that she did not truly have suicidal intention or plans, but rather was frustrated and was having difficulty managing that frustration. She reported a desire to challenge her thinking and to utilize her healthy coping skills. She also identified her growth by speculating what she may have done in response to this situation in the past, to include sending provocative emails, using a sharp disrespectful tone, and having suicidal intention or plans. She noted that over the past few days when she had suicidal ideation, she was able to distract her thoughts to something else and questioned how suicide watch would be helpful, as opposed to other available coping skills.

Current Mental Status

Level of Consciousness: Alert and Oriented

Psychomotor Activity: Normal

General Appearance: Neat/well groomed

Behavior: Cooperative

Mood: Appropriate to Content

Thought Process: Goal Directed

Thought Content: Normal

Risk and Protective Factors Assessed

This writer screened the inmate for a variety of empirically validated factors commonly associated with risk for self-harm and suicide.

The following **STATIC** risk factors were assessed to be present and increase the inmate's risk for engaging in suicide related behaviors: History of childhood abuse (physical or sexual), History of inpatient psychiatric treatment, History of mental illness, History of self-injury or suicide attempt, History of violent behavior

The following **DYNAMIC** risk factors were assessed to be present and increase the inmate's risk for engaging in suicide related behaviors: Agitation, Current suicidal ideation, Feeling hopeless/helpless, Problem solving deficits

The following **PROTECTIVE** factors were assessed to be present and may decrease the inmate's risk of suicide: Able to identify reasons to live, Adequate problem solving skills, Denial of suicidal ideation/intention/plans, Future orientation, Social support in the institution, Supportive family relationships, View of death as negative, Willingness to engage in treatment

Regarding static risk factors, IM SOUTH has a history of suicide, mental illness, inpatient hospitalization, childhood abuse, and a violent history.

Regarding dynamic risk factors for suicide, IM SOUTH indicated that she does have suicidal ideation and feelings of hopelessness regularly but has no suicide intention or plan at this time. She also reported feeling agitated and appeared to have problem solving deficits at the beginning of this assessment.

Regarding protective factors against suicide, IM SOUTH denied suicidal intention or plans at this time. IM SOUTH presents as future oriented and has identified reasons for living. She identified goals for the future and is willing to engage in treatment. IM SOUTH reported having supportive relationships in the community and various staff members and peers at FTD. She identified several coping skills and problem solving strategies during this contact.

Diagnosis

Alcohol Use Disorder: Severe, F10.20*b - Current

Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current

Cannabis Use Disorder, Severe, F12.20*b - Current

Gender Dysphoria In Adolescents And Adults, F64.1 - Current

Posttraumatic Stress Disorder, F43.10 - Current

**Bureau of Prisons
Psychology Services
Administrative Contact with an Inmate**

SENSITIVE BUT UNCLASSIFIED

Inmate Name:	SOUTH, JASON ROBERT	Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M
		Facility:	FTD
Date:	04/10/2020 12:31	Provider:	Bell, A. Psy.D.
		Unit Team:	UNIT 1

Comments

IM SOUTH returned her Playaway in good condition.

Completed by Bell, A. Psy.D. on 04/14/2020 10:21

Reviewed by Marantz, Stacie PsyD/Chief Psychologist on 04/14/2020 12:06

**Bureau of Prisons
Psychology Services
Administrative Contact with an Inmate**

****SENSITIVE BUT UNCLASSIFIED****

Inmate Name:	SOUTH, JASON ROBERT	Sex:	M	Facility:	FTD	Reg #:	57903-019	
Date of Birth:	09/11/1978	Provider:	Bell, A. Psy.D.	Unit Team:	UNIT 1			
Date:	04/08/2020 13:40							

Comments

IM SOUTH requested to renew her playaway rental for two more days and this was granted. Her new return date is 4/10/2020.

Completed by Bell, A. Psy.D. on 04/09/2020 10:57

Reviewed by Marantz, Stacie PsyD/Chief Psychologist on 04/09/2020 11:33

**Bureau of Prisons
Psychology Services
Clinical Intervention - Clinical Contact**

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M	Facility: FTD
Date: 04/06/2020 14:21	Provider: Bell, A. Psy.D.	Unit Team: UNIT 1

Focus of Session

Inmate SOUTH has been identified as a CARE2-MH inmate on the basis of her mental health diagnosis of Bipolar I Disorder, Posttraumatic Stress Disorder, Borderline Personality Disorder, Other Specified Personality Disorder, and Gender Dysphoria in Adolescents and Adults and need for services. Inmate SOUTH is being seen at least monthly to address mental health and adjustment issues.

IM SOUTH reported an overall decrease in her symptoms and positive use of coping skills since her last session. She indicated his sleep and appetite have been within normal limits. IM SOUTH is currently prescribed Cymbalta and Remeron (self-carry) and Lamictal. A review of BEMR indicates IM SOUTH is compliant with medication. IM SOUTH denied clinically significant symptoms of any mood, anxiety or thought disorder at this time. IM SOUTH denied having thoughts of suicide or homicide. IM SOUTH currently works in Yard AM, a job she reportedly enjoys. IM SOUTH reports she does speak to social supports regularly. IM SOUTH indicated she feels safe on the compound and denied having any identifiable threat to her safety at this time.

Subjective/Objective Presentation

IM SOUTH presented as alert and oriented in all spheres. IM 's mood appeared euthymic and affect matched. IM SOUTH maintained appropriate eye contact and her rate and tone of speech were within normal limits. There was no evidence of thought or perceptual disturbances at this time.

Intervention(s)

Supportive counseling was provided and coping skills were reviewed. The importance of medication compliance was discussed. In addition, the following interventions relevant to his treatment goals were utilized:

- Complete Basic Cognitive Skills
- Use RSAs to effectively manage mood and anxiety symptoms
- Learn and review DBT skills

Specifically, IM SOUTH discussed the possible reasons why her symptoms have decreased to include her new medications, her comfort level with staff, and her continued use and comfort with her coping skills. She indicated that she feels more balanced and indicated that helps her focus even further on coping skills and coping skill development. She expressed interest in utilizing more mindfulness techniques and was provided a playaway device in order to aid in this goal. See attached rental agreement form. She was also provided her psychology file which she indicated has been helpful for her in the past to confirm that her treatment provider understands her concerns. See attached consent form.

Progress/Plan

IM SOUTH will continued to be engaged in treatment activities related to his treatment plan on at least a monthly basis in accordance with Care 2-MH policy. Frequency may increase due to presenting problems, symptoms, and/or clinician's judgment. IM SOUTH was reminded how he may contact Psychology Services in the event of an emergency.

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current
 Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current
 Cannabis Use Disorder, Severe, F12.20*b - Current
 Gender Dysphoria In Adolescents And Adults, F64.1 - Current
 Posttraumatic Stress Disorder, F43.10 - Current
 Borderline Personality Disorder, F60.3 - Current
 Other Specified Personality Disorder, F60.89 - Current

Inmate Name:	SOUTH, JASON ROBERT	Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M
		Facility:	FTD
Date:	04/06/2020 14:21	Provider:	Bell, A. Psy.D.
		Unit Team:	UNIT 1

Completed by Bell, A. Psy.D. on 04/09/2020 12:03

Bureau of Prisons
Psychology Services
Clinical Intervention - Clinical Contact

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT	Sex: M	Facility: FTD	Reg #: 57903-019
Date of Birth: 09/11/1978	Provider: Bell, A. Psy.D.		Unit Team: UNIT 1
Date: 03/23/2020 13:07			

Focus of Session

Inmate SOUTH has been identified as a CARE2-MH inmate on the basis of her mental health diagnosis of Bipolar I Disorder, Posttraumatic Stress Disorder, Borderline Personality Disorder, Other Specified Personality Disorder, and Gender Dysphoria in Adolescents and Adults and need for services. Inmate SOUTH is being seen at least monthly to address mental health and adjustment issues. This writer made contact with IM SOUTH during building rounds and she requested to speak with this writer.

IM SOUTH reported distress stemming from her recent PREA allegations that resulted in her placement on suicide watch since her last session. She indicated his sleep and appetite have been within normal limits. IM SOUTH is currently prescribed Cymbalta and Remeron (self-carry). IM SOUTH endorsed clinically significant symptoms of a mood and trauma disorder at this time. IM SOUTH denied having thoughts of suicide or homicide. IM SOUTH currently works in Yard AM, a job she reportedly enjoys. IM SOUTH reports she does speak to her social supports on the phone regularly. IM SOUTH indicated she feels safe on the compound and denied having any identifiable threat to her safety at this time.

Subjective/Objective Presentation

IM SOUTH presented as alert and oriented in all spheres. IM 's mood appeared distressed and affect matched. IM SOUTH presented as tearful during this contact with was congruent with the content. IM SOUTH maintained appropriate eye contact and her rate and tone of speech were within normal limits. There was no evidence of thought or perceptual disturbances at this time.

Intervention(s)

Supportive counseling was provided and coping skills were reviewed. The importance of medication compliance was discussed. In addition, the following interventions relevant to his treatment goals were utilized:

- Learn and review DBT skills

Specifically, this writer encouraged the use of a relaxation technique at this time due to her current distress. IM SOUTH indicated that she was going to use a mindful eating while making and eating her food. She also indicated food was a comfort for her. This writer supported the use of this intervention.

Progress/Plan

IM SOUTH will continued to be engaged in treatment activities related to his treatment plan on at least a monthly basis in accordance with Care 2-MH policy. Frequency may increase due to presenting problems, symptoms, and/or clinician's judgment. IM SOUTH was reminded how he may contact Psychology Services in the event of an emergency.

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current

Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current

Cannabis Use Disorder, Severe, F12.20*b - Current

Gender Dysphoria In Adolescents And Adults, F64.1 - Current

Posttraumatic Stress Disorder, F43.10 - Current

Borderline Personality Disorder, F60.3 - Current

Other Specified Personality Disorder, F60.89 - Current

Inmate Name:	SOUTH, JASON ROBERT	Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M
		Facility:	FTD
Date:	03/23/2020 13:07	Provider:	Bell, A. Psy.D.
		Unit Team:	UNIT 1

Completed by Bell, A. Psy.D. on 03/24/2020 10:51

**Bureau of Prisons
Psychology Services
Suicide Risk Assessment**

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT	Reg #: 57903-019
Date of Birth: 09/11/1978 Sex: M Facility: FTD	Unit Team: UNIT 1
Date: 03/22/2020 08:10 Provider: Rodriguez, Jamie PsyD/Dap Coord	

Type of Housing: General Population
Cell Accommodation: Open Unit

Findings

This assessment and the resulting recommendations are based on the following sources of information:
 Clinical Interview, Medical Record, Other, Presentence Report, Psychology Data System, Sentry

IM SOUTH is currently in the transition process from male to female. Information from older records uses male pronouns but this writer will utilize female pronouns.

Reason for Referral

IM SOUTH was referred to psychology at approximately 1:00 pm on 03/21/2020 via phone call to this writer as the Duty Psychologist. She was seen on 03/22/2020 at 8:15 am. The Activities Lt. indicated that IM SOUTH was interviewed by SIS and appeared distressed, i.e. excessively crying. The Activities Lt. was concerned and called IM SOUTH back to the office to ask her questions to assure her safety. At that time, IM SOUTH was crying uncontrollably and stated that she could not "do this" anymore and wanted "it to end." The Activities Lt. communicated to this writer that IM SOUTH endorsed suicidal ideation; therefore a suicide watch was initiated until this writer could properly assess IM SOUTH.

Developmental History

According to SRA (dated 5/25/18):
 Inmate SOUTH describes his childhood as "traumatic and unstable." He was raised by his mother, as his father was killed in an automobile accident five months prior to his birth. His mother was an alcohol abuser; he stated she never provided a stable home environment, and she ultimately passed away due to "cardiac arrest by withdrawal from alcohol." From age 10 to 14, Inmate SOUTH lived with his mother, who frequently threatened to send him to the foster system due to his behavioral problems. He lived with various friends at age 14, and then in his own apartment beginning at age 15, when he dropped out of high school and began working at Pizza Hut.

Educational History/Cognitive Impairment

According to SRA (dated 5/25/18):
 Inmate SOUTH was expelled from fifth grade due to "behavior problems." In sixth grade at a new school, Inmate SOUTH's school requested a psychological evaluation in response to his display of behavioral problems resulting in multiple suspensions. Per the PSI, Inmate SOUTH participated in "stealing, fighting, skipping school and being destructive." The evaluation included the recommendation he be placed in an intensive therapeutic program where he could complete his middle school studies.

After completing middle school by way of the Outdoor Therapeutic Program (OTP), a wilderness immersion program for behaviorally disordered youth, Inmate SOUTH entered high school. He withdrew prior to completion of ninth grade.

Arrest History and Experience of Incarceration

According to SRA (dated 5/25/18):
 Inmate SOUTH states he was sexually victimized by a staff member at another federal correctional facility. Documents suggest this information was reported and PREA protocol was followed. Since the alleged incident, Inmate SOUTH has requested treatment for trauma-related illness.

Mental Health History

Inmate SOUTH is currently designated Care 2-MH which is consistent with the DCLF dated 1/14/20.

According to SRA (dated 5/25/18):
 The PSI contains the following mental health history: "Records from the Georgia Department of Human Resources (DHR) indicate that in May 1991, at the age of 12, the defendant was referred to Northside Hospital in Atlanta, Georgia, for a psychological evaluation [see "Educational History," above]... An evaluation completed by Debbie Fruedenthal, M.A., and James Mullins, Ph.D., indicates the defendant was 'experiencing numerous difficulties, particularly in the area of conduct disorders, depression, and anxiety.' The defendant was depressed, angry, anxious and acting out his anger

Inmate Name:	SOUTH, JASON ROBERT	Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M
		Facility:	FTD
Date:	03/22/2020 09:01	Unit Team:	UNIT 1
		Provider:	Rodriguez, Jamie PsyD/Dap Coord

and agreed to do so if her symptoms increase.

Completed by Rodriguez, Jamie PsyD/Dap Coord on 03/22/2020 09:49

**Bureau of Prisons
Psychology Services
Post Suicide Watch Report**

****SENSITIVE BUT UNCLASSIFIED****

Inmate Name: SOUTH, JASON ROBERT	Sex: M	Facility: FTD	Reg #: 57903-019
Date of Birth: 09/11/1978	Provider: Rodriguez, Jamie	PsychD/Dap Coord	Unit Team: UNIT 1
Date: 03/22/2020 09:01			

Watch Start Date: 03/21/2020 13:45	Watch Stop Date: 03/22/2020 09:40
Total Time on Watch: 19 hrs 55 minutes	
Watch Conducted By: Staff	Transferred to Medical Center: No

Current Mental Status

Level of Consciousness: Alert and Oriented

Psychomotor Activity: Normal

General Appearance: Normal

Behavior: Cooperative

Mood: Appropriate to Content

Thought Process: Goal Directed

Thought Content: Normal

IM SOUTH presented as alert and oriented. He mood was euthymic with congruent affect. She was cooperative throughout the interaction. Her thought process was linear with appropriate content. There was no evidence of any thought or perceptual disturbances.

Risk Factors Assessed:

This writer screened the inmate for a variety of empirically validated factors commonly associated with risk for self harm.

The following **STATIC** risk factors were assessed to be present and increase the inmate's risk for engaging in suicide related behaviors: History of childhood abuse (physical or sexual), History of inpatient psychiatric treatment, History of mental illness, History of self-injury or suicide attempt, History of violent behavior

The following **DYNAMIC** risk factors were assessed to be present and increase the inmate's risk for engaging in suicide related behaviors: Current physical pain, Feeling like a burden to others, Sleep problems

The following **PROTECTIVE** factors were assessed to be present and may decrease the inmate's risk of suicide: Able to identify reasons to live, Adequate problem solving skills, Denial of suicidal ideation/intention/plans, Future orientation, Social support in the institution, Supportive family relationships, View of death as negative, Willingness to engage in treatment

Static Risk Factors include: history of childhood abuse, history of inpatient psychiatric hospitalizations, history of mental illness, history of self-injury, history of violent behavior. Dynamic Factors include: current physical pain (lapse in non-formulary pain medications), feeling like a burden to others, sleep problems (secondary to pain from lapse in medications). Protective factors include: reasons for living (desire for her own family, future plans after incarceration), adequate problem-solving skills, denial of suicidal ideation, future orientation, social support in the institution, supportive family relationships (described as "somewhat" supportive; however, her sister and her father are present in her life), and she is willing to engage in treatment.

Reason for Referral

IM SOUTH was referred to psychology at approximately 1:00 pm on 03/21/2020 via phone call to this writer as the Duty Psychologist. She was seen on 03/22/2020 at 8:15 am. The Activities Lt. indicated that IM SOUTH was interviewed by SIS and appeared distressed, i.e. excessively crying. The Activities Lt. was concerned and called IM SOUTH back to the office to ask her questions to assure her safety. At that time, IM SOUTH was crying uncontrollably and stated that she could not "do this" anymore and wanted "it to end." The Activities Lt. communicated to this writer that IM SOUTH endorsed suicidal ideation; therefore a suicide watch was initiated until this writer could properly assess IM SOUTH.

Changes in Risk Factors Assessed

There were no changes in risk factors. It was during the suicide risk assessment that it was determined that a suicide watch was no longer warranted. This was done in consultation with the Chief Psychologist.

Reason for Removal from Watch

Suicide watch was initiated by non-clinical staff on 3/21/2020 at 1:45 pm after IM SOUTH conveyed suicidal ideation to

Inmate Name:	SOUTH, JASON ROBERT			Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M	Facility:	FTD
Date:	03/22/2020 09:01	Provider:	Rodriguez, Jamie PsyD/Dap Coord	Unit Team:	UNIT 1

the Activities Lt. On this date, IM SOUTH was seen at 8:15 am at the suicide watch cell, Health Services, East compound. IM SOUTH appropriately came to cell front to greet this writer. IM SOUTH denied current suicidal ideation, planning, or intent. She explained that yesterday she was questioned by SIS and described it as "intense" and "aggressive." She explained that she asked to speak to psychology before questions were even asked. She stated, "I was overwhelmed. I didn't want to talk. This was two days in a row." When she left the interview with SIS, she went back to the unit. Her intent was to use grounding (shower alternating between cold and hot water) to calm herself but she was called back to the Lt.'s complex. She indicated that she was still crying uncontrollably. She denied stating that she was suicidal; however, indicated she could see why the Lt. may have been given that impression ("I said something like I was tired of living like this.").

This writer discussed positive coping skills based on her ongoing psychological treatment. DBT skills appeared to be the most effective for IM SOUTH. She indicated that she is able to acknowledge her emotional state while certain situations occur and engage in self-soothing and/or distracting techniques. Overall, she discussed history of suicidal ideation and noted that she does struggle with suicidal thoughts. She stated, "I don't want to hurt myself. Those thoughts scare me." In this particular situation, she was overwhelmed and did not have the ability to remove herself; however, alternative coping/resources were discussed. She acknowledged that the Lt. was asking questions to determine if she was suicidal and IM SOUTH was not as direct as she could have been, rather made provocative statements. Discussed being assertive and stating that she was not suicidal and request to speak to Psychology would still result in her having contact with Psychology Services, even after hours.

Based on the circumstances, current presentation, and a review of risk and protective factors, the Chief Psychologist was consulted at it was determined that the suicide watch was no longer warranted.

Diagnosis:

Alcohol Use Disorder: Severe, F10.20*b - Current
 Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current
 Cannabis Use Disorder, Severe, F12.20*b - Current
 Gender Dysphoria In Adolescents And Adults, F64.1 - Current
 Posttraumatic Stress Disorder, F43.10 - Current
 Borderline Personality Disorder, F60.3 - Current
 Other Specified Personality Disorder, F60.89 - Current

Conclusions

The Overall Acute Suicide Risk for this Inmate is: Low
 Overall Chronic Suicide Risk for this Inmate is: Absent

Recommendations

Summary:

IM SOUTH was referred to psychology at approximately 1:00 pm on 03/21/2020 via phone call to this writer as the Duty Psychologist. She was seen on 03/22/2020 at 8:15 am. The Activities Lt. indicated that IM SOUTH was interviewed by SIS and appeared distressed, i.e. excessively crying. The Activities Lt. was concerned and called IM SOUTH back to the office to ask her questions to assure her safety. At that time, IM SOUTH was crying uncontrollably and stated that she could not "do this" anymore and wanted "it to end." The Activities Lt. communicated to this writer that IM SOUTH endorsed suicidal ideation; therefore a suicide watch was initiated until this writer could properly assess IM SOUTH. Within this clinical assessment, IM SOUTH denied current suicidal ideation, planning, or intent. She acknowledged that she was overwhelmed by the interview with SIS. Coping skills and assertive communication were discussed. Based on the circumstances, current presentation, and a review of risk and protective factors, the Chief Psychologist was consulted at it was determined that the suicide watch was no longer warranted.

Recommendations:

1. IM SOUTH will be maintained as a Care2-MH and will be seen in accordance with Care 2-MH policy.
2. Medication compliance should be monitored and continue to be encouraged. Health Services was contacted with regard to the lapse in pain medication. Health Services explained that the medication is non-formulary and is pending approval through central office.
3. IM SOUTH was reminded and understood how she may contact Psychology Services for emergent and non-emergent situations

Inmate Name:	SOUTH, JASON ROBERT			Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M	Facility:	FTD
Date:	03/22/2020 08:10	Provider:	Rodriguez, Jamie PsyD/Dap Coord		

Unit Team:	UNIT 1
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with little insight or judgment, often blaming others for his behavior... Shortly after the psychological evaluation was completed, the defendant was admitted to an inpatient treatment program at Northside Hospital after he expressed suicidal ideation and began cutting and carving on his arm. The defendant attributed his behavior to being suspended from school again and feeling that his friends were angry at him. The defendant was diagnosed with 'Major Depression and Conduct Disorder' (DSM III). The defendant was placed on antidepressant medication to alleviate some of his depression and decrease mood swings... A psychoeducational report from the Fulton County, Georgia School System, dated August 1991, indicates the defendant was referred for an evaluation to determine his eligibility for placement in the Behavior Disorders Program. The defendant was described as inattentive during group discussion and having trouble maintaining concentration and completing assignments. It was also noted that the defendant was often involved in verbal and physical altercations with his peers, and often responded in a defiant manner when confronted regarding his behavior. The defendant's intellectual functioning was found to be in the high-average concentration with a Full Scale IQ of 115; however, a significant discrepancy was observed between the defendant's verbal and performance IQ's, suggesting that while the defendant has superior intellectual potential, he has difficulty demonstrating this in the verbal expressive modality... The defendant self-reported trouble controlling his temper and complying with class structure and routine. The defendant also reported being argumentative with his peers. Contact with the defendant's private psychologist indicated the defendant recently completed social/emotional testing and there was evidence of depression and conduct difficulties... The defendant denied any history of psychosis, including auditory or visual hallucinations, or recent suicidal ideation. The defendant attributed his mental/emotional problems during adolescence to his mother being an alcoholic... The defendant is currently being treated for anxiety..."

While in the BOP, Inmate SOUTH has been housed at seven institutions, and had nearly 150 contacts with mental health services per his request. He has previously been diagnosed with panic disorder, agoraphobia, panic disorder without agoraphobia, depressive disorder NOS, major depressive disorder, antisocial personality disorder, and personality disorder. His medication history includes Xanax, Celexa and Zoloft.

Regarding treatment programs, Inmate SOUTH completed Drug Education in 2009, was expelled from Challenge in 2010 (see note 12/20/2010), expelled from NR DAP in 2011, withdrew from Mindfulness Based Cognitive Therapy in 2013, and was withdrawn from Anger Management in 2017 (did not present with ID and failed to make the move). Treatment summaries and individual therapy records indicate several maladaptive patterns of behavior including, "avoidance of responsibility," blaming others, "entitlement issues" and demandingness. The Challenge expulsion note (2010) indicated that he was proactive in getting needs met and he demonstrated coping skills to utilize when experiencing unpleasant emotions. The clinician surmised that he had "minimal change - he continues to accept responsibility for his behaviors, has involvement in criminal activity, struggles with being open-minded, humility, accepting negative feedback, and has entitlement issues." He was FRP refuse and was non-compliant with treatment. The NR DAP expulsion note (2011) indicated that he had "limited insight, mollification, absences and less committed compared to peers." He was ultimately coded as NR FAIL due to non-compliance.

In individual therapy, records show clinicians have worked with Inmate SOUTH using cognitive behavioral modes of treatment. CBT based coping skills, anxiety and anger management, and DBT skills (reality acceptance and distress tolerance) were taught. PDS records show he appeared to intermittently benefit from treatment, as well as patterns of non-compliance with assigned homework/ treatment interventions, inability or unwillingness to apply acquired skills, repeated cop-outs expressing the need for services followed by a dissatisfaction with services offered or perceived needs not being met and missed appointments.

In June 2017, Inmate SOUTH first requested institutional transfer to FCI Danbury to participate in the Resolve Program. A referral was formally made by FCI Phoenix to FCI Danbury. Between 07-03-2017 and 08-30-2017 while awaiting response, he submitted 32 cop outs inquiring as to the status of this referral. He was advised he had been denied program transfer by FCI Danbury on 08-30-2017; the following day, he submitted an additional cop out stating he had contacted an attorney and no longer wished to receive psychological services at this facility.

In January 2018, however, Inmate SOUTH submitted a cop out requesting to be seen for treatment again. He was assigned to a new provider (this writer), and in the last four months has been seen for five clinical contacts. After the third of these five contacts, he was provided a psychotropic medication referral, as well as psychoeducation that despite

Inmate Name:	SOUTH, JASON ROBERT			Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M	Facility:	FTD
Date:	03/22/2020 08:10	Provider:	Rodriguez, Jamie	Unit Team:	UNIT 1
			PsyD/Dap Coord		

evidence-based treatment interventions his severe symptoms were not improving. He failed to attend the appointment. One month later he returned endorsing still worsening symptoms; he was again referred to Health Services for an evaluation. Upon being seen, he declined to initiate a medication regimen, instead stating he wanted an MRI to "rule out anything medical." The physician informed him findings of an MRI would not change his recommendations regarding psychotropic medication, but the inmate again declined.

In February 2018, Inmate SOUTH requested to be reconsidered for FCI Danbury's Resolve Program. The Resolve Coordinator and Chief Psychologist again advised FCI Phoenix Inmate SOUTH would not be transferred for that program at that time. In April 2018, he filed a BP-8 stating he had been "wrongfully denied" treatment. He was advised of the rationale and provided ample treatment options at his local institution. In May 2018, he submitted a BP-9, reiterating "wrongful denial" of treatment and requesting to be provided the rationale in writing. He was again provided comprehensive rational after consultation with the denying institution and Central Office, as well as an abundance of treatment options available to him at this facility. He was again referred to sick call to discuss medical interventions for symptom management, and again failed to report. When he presented to Psychology Services today for a scheduled clinical contact, he described his symptoms as continuing to worsen in severity and intensity, and expressed a sense of helplessness to improve his circumstances.

Self-Harm History

According to SRA (dated 5/25/18):

Inmate SOUTH had a remote history of suicidal ideation and suicidal gestures during his teenage years which was documented in his PSR; however, prior to his statement today, he has not demonstrated any suicidal ideation or behaviors in adulthood and since incarceration.

Substance Abuse History

According to SRA (dated 5/25/18):

Per his report today, and substantiated by his PSI, Inmate SOUTH has a substantial history of marijuana and alcohol use, beginning at age 13 until the time of his arrest for the instant offense. He denied a history of stimulant use, stating he used cocaine "a couple of times," but learned he only likes "downers."

Medical Concerns

According to SRA (dated 5/25/18):

In March 2019, Inmate SOUTH reported he was "hit in the head" with a "mallet" by an officer conducted bar taps in the unit. The inmate stated he was asleep in his bunk when the incident occurred, and stated he was unsure whether it was done intentionally. He stated subsequent to this incident he "saw some stars" and began experiencing dizziness, weakness, blurry vision, headaches, feeling "woozy," "heavy eyes," like if you had your eyes crossed for too long" and posterior cervical pain. An evaluation was ordered to rule out intracerebral trauma. Findings of that evaluation, including a CT scan of head and cervical spine, were returned with negative results.

Current Problem

Suicide watch was initiated by non-clinical staff on 3/21/2020 at 1:45 pm after IM SOUTH conveyed suicidal ideation to the Activities Lt. On this date, IM SOUTH was seen at 8:15 am at the suicide watch cell, Health Services, East compound. A review of the log books reflected that at approximately 2:09 pm on 3/21/2020, IM SOUTH stated that she was fine and ready to come off of suicide watch. She stated that she was "overly emotional" and attributed this to current hormonal treatment (Note: Activities Lt. did call this writer yesterday at approximately 2:30 conveying this however since an SRA was not conducted this writer advised that the watch needed to continue).

IM SOUTH appropriately came to cell front to greet this writer. IM SOUTH denied current suicidal ideation, planning, or intent. She explained that yesterday she was questioned by SIS and described it as "intense" and "aggressive." She explained that she asked to speak to psychology before questions were even asked. She stated, "I was overwhelmed. I didn't want to talk. This was two days in a row." When she left the interview with SIS, she went back to the unit. Her intent was to use grounding (shower alternating between cold and hot water) to calm herself but she was called back to the Lt.'s complex. She indicated that she was still crying uncontrollably. She denied stating that she was suicidal; however, indicated she could see why the Lt. may have been given that impression ("I said something like I was tired of living like this.").

This writer discussed positive coping skills based on her ongoing psychological treatment. DBT skills appeared to be the

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Borderline Personality Disorder, F60.3 - Current

Other Specified Personality Disorder, F60.89 - Current

Conclusions

The Overall Acute Suicide Risk for this Inmate is: Low
 Overall Chronic Suicide Risk for this Inmate is: Absent

Recommendations

SUMMARY:

IM SOUTH was referred to psychology at approximately 1:00 pm on 03/21/2020 via phone call to this writer as the Duty Psychologist. She was seen on 03/22/2020 at 8:15 am. The Activities Lt. indicated that IM SOUTH was interviewed by SIS and appeared distressed, i.e. excessively crying. The Activities Lt. was concerned and called IM SOUTH back to the office to ask her questions to assure her safety. At that time, IM SOUTH was crying uncontrollably and stated that she could not "do this" anymore and wanted "it to end." The Activities Lt. communicated to this writer that IM SOUTH endorsed suicidal ideation; therefore a suicide watch was initiated until this writer could properly assess IM SOUTH. Within this clinical assessment, IM SOUTH denied current suicidal ideation, planning, or intent. She acknowledged that she was overwhelmed by the interview with SIS. Coping skills and assertive communication were discussed. Based on the circumstances, current presentation, and a review of risk and protective factors, the Chief Psychologist was consulted at it was determined that the suicide watch was no longer warranted.

RECOMMENDATIONS:

1. Suicide watch will be terminated.
2. IM SOUTH will be maintained as a Care2-MH and will be seen in accordance with Care 2-MH policy.
3. Medication compliance should be monitored and continue to be encouraged. Health Services was contacted with regard to the lapse in pain medication. Health Services explained that the medication is non-formulary and is pending approval through central office.
4. IM SOUTH was reminded and understood how she may contact Psychology Services for emergent and non-emergent situations and agreed to do so if her symptoms increase.

Suicide Watch: A suicide watch was initiated by non-clinical staff and is no longer warranted

Suicide Watch was initiated on: 03/21/2020 13:45

Completed by Rodriguez, Jamie PsyD/Dap Coord on 03/22/2020 09:38

Inmate Name:	SOUTH, JASON ROBERT			Reg #:	57903-019
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				Unit Team:	UNIT 1

most effective for IM SOUTH. She indicated that she is able to acknowledge her emotional state while certain situations occur and engage in self-soothing and/or distracting techniques. Overall, she discussed history of suicidal ideation and noted that she does struggle with suicidal thoughts. She stated, "I don't want to hurt myself. Those thoughts scare me." In this particular situation, she was overwhelmed and did not have the ability to remove herself; however, alternative coping/resources were discussed. She acknowledged that the Lt. was asking questions to determine if she was suicidal and IM SOUTH was not as direct as she could have been, rather made provocative statements. Discussed being assertive and stating that she was not suicidal and request to speak to Psychology would still result in her having contact with Psychology Services, even after hours.

Current Mental Status

Level of Consciousness: Alert and Oriented

Psychomotor Activity: Normal

General Appearance: Normal

Behavior: Cooperative

Mood: Appropriate to Content

Thought Process: Goal Directed

Thought Content: Normal

IM SOUTH presented as alert and oriented. Her mood was euthymic with congruent affect. She was cooperative throughout the interaction. Her thought process was linear with appropriate content. There was no evidence of any thought or perceptual disturbances.

Risk and Protective Factors Assessed

This writer screened the inmate for a variety of empirically validated factors commonly associated with risk for self-harm and suicide.

The following **STATIC** risk factors were assessed to be present and increase the inmate's risk for engaging in suicide related behaviors: History of childhood abuse (physical or sexual), History of inpatient psychiatric treatment, History of mental illness, History of self-injury or suicide attempt, History of violent behavior

The following **DYNAMIC** risk factors were assessed to be present and increase the inmate's risk for engaging in suicide related behaviors: Current physical pain, Feeling like a burden to others, Sleep problems

The following **PROTECTIVE** factors were assessed to be present and may decrease the inmate's risk of suicide: Able to identify reasons to live, Adequate problem solving skills, Denial of suicidal ideation/intention/plans, Future orientation, Social support in the institution, Supportive family relationships, Willingness to engage in treatment

Static Risk Factors include: history of childhood abuse, history of inpatient psychiatric hospitalizations, history of mental illness, history of self-injury, history of violent behavior. Dynamic Factors include: current physical pain (lapse in non-formulary pain medications), feeling like a burden to others, sleep problems (secondary to pain from lapse in medications). Protective factors include: reasons for living (desire for her own family, future plans after incarceration), adequate problem-solving skills, denial of suicidal ideation, future orientation, social support in the institution, supportive family relationships (described as "somewhat" supportive; however, her sister and her father are present in her life), and she is willing to engage in treatment.

Based on the assessment and number of protective factors endorsed, this writer consulted with the Chief Psychologist. It was determined that a suicide watch was no longer warranted. Operations was notified.

Diagnosis

Alcohol Use Disorder: Severe, F10.20*b - Current

Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current

Cannabis Use Disorder, Severe, F12.20*b - Current

Gender Dysphoria In Adolescents And Adults, F64.1 - Current

Posttraumatic Stress Disorder, F43.10 - Current

Inmate Name: SOUTH, JASON ROBERT
 Date of Birth: 09/11/1978 Sex: M Facility: FTD
 Date: 03/18/2020 14:18 Provider: Bell, A. Psy.D.

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 Unit Team: UNIT 1

from school again and feeling that his friends were angry at him. The defendant was diagnosed with 'Major Depression and Conduct Disorder' (DSM III). The defendant was placed on antidepressant medication to alleviate some of his depression and decrease mood swings... A psychoeducational report from the Fulton County, Georgia School System, dated August 1991, indicates the defendant was referred for an evaluation to determine his eligibility for placement in the Behavior Disorders Program. The defendant was described as inattentive during group discussion and having trouble maintaining concentration and completing assignments. It was also noted that the defendant was often involved in verbal and physical altercations with his peers, and often responded in a defiant manner when confronted regarding his behavior. The defendant's intellectual functioning was found to be in the high-average concentration with a Full Scale IQ of 115; however, a significant discrepancy was observed between the defendant's verbal and performance IQ's, suggesting that while the defendant has superior intellectual potential, he has difficulty demonstrating this in the verbal expressive modality... The defendant self-reported trouble controlling his temper and complying with class structure and routine. The defendant also reported being argumentative with his peers. Contact with the defendant's private psychologist indicated the defendant recently completed social/emotional testing and there was evidence of depression and conduct difficulties... The defendant denied any history of psychosis, including auditory or visual hallucinations, or recent suicidal ideation. The defendant attributed his mental/emotional problems during adolescence to his mother being an alcoholic... The defendant is currently being treated for anxiety..."

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Regarding treatment programs, Inmate SOUTH completed Drug Education in 2009, was expelled from Challenge in 2010 (see note 12/20/2010), expelled from NR DAP in 2011, withdrew from Mindfulness Based Cognitive Therapy in 2013, and was withdrawn from Anger Management in 2017 (did not present with ID and failed to make the move). Treatment summaries and individual therapy records indicate several maladaptive patterns of behavior including, "avoidance of responsibility," blaming others, "entitlement issues" and demandingness. The Challenge expulsion note (2010) indicated that he was proactive in getting needs met and he demonstrated coping skills to utilize when experiencing unpleasant emotions. The clinician surmised that he had "minimal change - he continues to accept responsibility for his behaviors, has involvement in criminal activity, struggles with being open-minded, humility, accepting negative feedback, and has entitlement issues." He was FRP refuse and was non-compliant with treatment. The NR DAP expulsion note (2011) indicated that he had "limited insight, mollification, absences and less committed compared to peers." He was ultimately coded as NR FAIL due to non-compliance.

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**Bureau of Prisons
Psychology Services
Suicide Risk Assessment**

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M Facility: FTD	Unit Team: UNIT 1
Date: 03/18/2020 14:18	Provider: Bell, A. Psy.D.	

Type of Housing: General Population
Cell Accommodation: Open Unit

Findings

This assessment and the resulting recommendations are based on the following sources of information:
 Clinical Interview, Inmate Writing, Presentence Report, Psychology Data System, Sentry

IM SOUTH is currently in the transition process from male to female. Information from older records uses male pronouns but this writer will utilize female pronouns.

Reason for Referral

IM SOUTH sent an email to the Psychology inbox on 3/17/2020 at 8:21pm that stated she was experiencing "increased suicidal ideation." This writer became aware of these email at approximately 10:00am upon entering the institution and began attempts to locate her and conduct this assessment. She was seen on 03/17/2020 at approximately 1:10pm.

Developmental History

According to SRA (dated 5/25/18):

Inmate SOUTH describes his childhood as "traumatic and unstable." He was raised by his mother, as his father was killed in an automobile accident five months prior to his birth. His mother was an alcohol abuser; he stated she never provided a stable home environment, and she ultimately passed away due to "cardiac arrest by withdrawal from alcohol." From age 10 to 14, Inmate SOUTH lived with his mother, who frequently threatened to send him to the foster system due to his behavioral problems. He lived with various friends at age 14, and then in his own apartment beginning at age 15, when he dropped out of high school and began working at Pizza Hut.

Educational History/Cognitive Impairment

According to SRA (dated 5/25/18):

Inmate SOUTH was expelled from fifth grade due to "behavior problems." In sixth grade at a new school, Inmate SOUTH's school requested a psychological evaluation in response to his display of behavioral problems resulting in multiple suspensions. Per the PSI, Inmate SOUTH participated in "stealing, fighting, skipping school and being destructive." The evaluation included the recommendation he be placed in an intensive therapeutic program where he could complete his middle school studies.

After completing middle school by way of the Outdoor Therapeutic Program (OTP), a wilderness immersion program for behaviorally disordered youth, Inmate SOUTH entered high school. He withdrew prior to completion of ninth grade.

Arrest History and Experience of Incarceration

According to SRA (dated 5/25/18):

Inmate SOUTH states he was sexually victimized by a staff member at another federal correctional facility. Documents suggest this information was reported and PREA protocol was followed. Since the alleged incident, Inmate SOUTH has requested treatment for trauma-related illness.

Mental Health History

Inmate SOUTH is currently designated Care 2-MH which is consistent with the DCLF dated 1/14/20.

According to SRA (dated 5/25/18):

The PSI contains the following mental health history: "Records from the Georgia Department of Human Resources (DHR) indicate that in May 1991, at the age of 12, the defendant was referred to Northside Hospital in Atlanta, Georgia, for a psychological evaluation [see "Educational History," above]... An evaluation completed by Debbie Fruedenthal, M.A., and James Mullins, Ph.D., indicates the defendant was 'experiencing numerous difficulties, particularly in the area of conduct disorders, depression, and anxiety.' The defendant was depressed, angry, anxious and acting out his anger with little insight or judgment, often blaming others for his behavior... Shortly after the psychological evaluation was completed, the defendant was admitted to an inpatient treatment program at Northside Hospital after he expressed suicidal ideation and began cutting and carving on his arm. The defendant attributed his behavior to being suspended

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anything medical." The physician informed him findings of an MRI would not change his recommendations regarding psychotropic medication, but the inmate again declined.

In February 2018, Inmate SOUTH requested to be reconsidered for FCI Danbury's Resolve Program. The Resolve Coordinator and Chief Psychologist again advised FCI Phoenix Inmate SOUTH would not be transferred for that program at that time. In April 2018, he filed a BP-8 stating he had been "wrongfully denied" treatment. He was advised of the rationale and provided ample treatment options at his local institution. In May 2018, he submitted a BP-9, reiterating "wrongful denial" of treatment and requesting to be provided the rationale in writing. He was again provided comprehensive rational after consultation with the denying institution and Central Office, as well as an abundance of treatment options available to him at this facility. He was again referred to sick call to discuss medical interventions for symptom management, and again failed to report. When he presented to Psychology Services today for a scheduled clinical contact, he described his symptoms as continuing to worsen in severity and intensity, and expressed a sense of helplessness to improve his circumstances.

Self-Harm History

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Inmate SOUTH had a remote history of suicidal ideation and suicidal gestures during his teenage years which was documented in his PSR; however, prior to his statement today, he has not demonstrated any suicidal ideation or behaviors in adulthood and since incarceration.

Substance Abuse History

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Per his report today, and substantiated by his PSI, Inmate SOUTH has a substantial history of marijuana and alcohol use, beginning at age 13 until the time of his arrest for the instant offense. He denied a history of stimulant use, stating he used cocaine "a couple of times," but learned he only likes "downers."

Medical Concerns

According to SRA (dated 5/25/18):

In March 2019, Inmate SOUTH reported he was "hit in the head" with a "mallet" by an officer conducted bar taps in the unit. The inmate stated he was asleep in his bunk when the incident occurred, and stated he was unsure whether it was done intentionally. He stated subsequent to this incident he "saw some stars" and began experiencing dizziness, weakness, blurry vision, headaches, feeling "woozy," "heavy eyes, like if you had your eyes crossed for too long" and posterior cervical pain. An evaluation was ordered to rule out intracerebral trauma. Findings of that evaluation, including a CT scan of head and cervical spine, were returned with negative results.

Current Problem

Upon interviewing, IM SOUTH reported that she was "better" today and that yesterday was a bad day for her due to several situational factors to include decreased sleep, issues with her medications (which were also noted in the email), a recent reported PREA incident, and tense interactions with staff. She denied current intent or plan for suicide and rather reported several positive changes in the past several weeks. It should be noted that this writer, her primary clinician, was out of the institution for several weeks and therefore had not met with IM SOUTH since he previous placement on suicide watch. IM SOUTH reported that he had been moved rooms and currently was comfortable with her cellmate. She indicated that being in the cell with only one other person has allowed her to have "retreat" from her stressors and therefore she has experienced less suicidal ideation since this move. Additionally, she reported positive supports from other transgender inmates, her unit team staff, custody staff, and executive staff. She indicated that she believed her placement at Fort Dix was "way better" than her other 9 placements in the BOP. Lastly, she reported feeling better able to expressed her feminine identity while on the compound and to respond to individuals who may treat her differently because of her gender expression.

IM SOUTH did reported suicidal ideation and indicated that she believes this is her baseline. She explained that she regularly has feelings of hopelessness or anger and frustration that lead her to think of suicide. She described this as "when the fires get lit in my mind, then I get hopeless." She indicated that the fires are stressors/triggers throughout her day. She noted that she is "scared" of these thoughts when they appear and that she is "not a suicidal person" and rather "doesn't want to die." She noted that when she experiences hopeless or anger and frustration she experiences tunnel vision and views suicide as a means to end her current pain. She expressed the desire to engage in treatment in order to develop more coping skills in order to decrease the experience of tunnel vision as she does not want to die. She.

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stated that she is currently using self-help materials that this writer provided, as well as materials sent to her by friends through email and a DBT book provided to her at a previous institution. This writer provided verbal praise for her insight into her suicide cycle and expressed understanding in the difference between suicidal ideation and suicidal intention.

At the end of the session IM SOUTH stated "I know I should probably not end with this but..." and began to report that she recently had suicidal ideation approximately one week ago. At that time she retrieved her razor and "popped" the blade out of the razor. She indicated that she had thoughts and a plan to kill herself with the razor but "talked myself out of it." She indicated that she used to cut herself when she was a teenager and had not thought about this since that time. She noted that she does not believe she will engage in cutting behavior at this time because she is "too vain" and does not want scarring as a result. She noted that once she decided not to cut herself, she took the razor to the bathroom and flushed it down the toilet. This writer offered positive verbal feedback for using impulse control strategies in order to pause in that moment and to eventually decide not to harm herself. She indicated that she wanted to continue to work on these interventions.

Current Mental Status

Level of Consciousness: Alert and Oriented

Psychomotor Activity: Normal

General Appearance: Neat/well groomed

Behavior: Cooperative

Mood: Appropriate to Content

Thought Process: Goal Directed

Thought Content: Normal

Risk and Protective Factors Assessed

This writer screened the inmate for a variety of empirically validated factors commonly associated with risk for self-harm and suicide.

The following **STATIC** risk factors were assessed to be present and increase the inmate's risk for engaging in suicide related behaviors: History of childhood abuse (physical or sexual), History of inpatient psychiatric treatment, History of mental illness, History of self-injury or suicide attempt, History of violent behavior

The following **DYNAMIC** risk factors were assessed to be present and increase the inmate's risk for engaging in suicide related behaviors: Current physical pain, Current suicidal ideation, Feeling hopeless/helpless, Sleep problems

The following **PROTECTIVE** factors were assessed to be present and may decrease the inmate's risk of suicide: Able to identify reasons to live, Adequate problem solving skills, Denial of suicidal ideation/intention/plans, Future orientation, Social support in the institution, Supportive family relationships, View of death as negative, Willingness to engage in treatment

Regarding static risk factors, IM SOUTH has a history of suicide, mental illness, inpatient hospitalization, childhood abuse, and a violent history.

Regarding dynamic risk factors for suicide, IM SOUTH indicated that she does have suicidal ideation and feelings of hopelessness regularly but has no suicide intention or plan at this time. She also reported recent difficulty sleeping and physical pain in her face.

Regarding protective factors against suicide, IM SOUTH denied suicidal intention or plans at this time. IM SOUTH presents as future oriented and has identified reasons for living. She identified goals for the future and is willing to engage in treatment. IM SOUTH reported having supportive relationships in the community and various staff members and peers at FTD. She identified several coping skills and problem solving strategies during this contact.

Diagnosis

Alcohol Use Disorder: Severe, F10.20*b - Current

Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current

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Cannabis Use Disorder, Severe, F12.20*b - Current

Gender Dysphoria In Adolescents And Adults, F64.1 - Current

Posttraumatic Stress Disorder, F43.10 - Current

Borderline Personality Disorder, F60.3 - Current

Other Specified Personality Disorder, F60.89 - Current

Conclusions

The Overall Acute Suicide Risk for this Inmate is: Low
 Overall Chronic Suicide Risk for this Inmate is: Absent

Recommendations

IM SOUTH sent an email to the Psychology inbox on 3/17/2020 at 8:21pm that stated she was experiencing "increased suicidal ideation." Upon receipt of this email, this writer located IM SOUTH and conducted this SRA. IM SOUTH reported having a difficult day the previous day due to situational factors and reported that she is "better" today. She reported experiencing suicidal ideation and hopelessness but denied any intention to act on this ideation and denied a specific plan at this time. She discussed her perceived baseline of suicidal ideation and suicide cycle, as noted above. She presented as motivated for treatment, has future orientation, and identified several coping skills and social/familial supports.

After consideration of the information gathered, the protective factors for suicide outweigh the risk factors present. Specifically her current denial of suicidal intention and plan. She also reported reasons to live, is actively participating in treatment, and has perceived support inside and outside the institution. She reported that she will speak to any available staff if her symptoms increase or if she has suicidal intention or plan in order to receive appropriate services and interventions. Based on this writer's clinical opinion, and in consultation with the Chief Psychologist, the protective factors outweigh the above risk factors and therefore a suicide watch is not warranted.

Recommendations:

1. IM SOUTH will be maintained as a Care2-MH and will be seen in accordance with Care 2-MH policy.
2. Medication compliance should be monitored and continue to be encouraged.
3. IM SOUTH was reminded and understood how she may contact Psychology Services for emergent and non-emergent situations and agreed to do so if her symptoms increase.
4. IM SOUTH was offered self-help materials but declined them at this time due to her already working on self-help materials. She indicated that she will let this writer know when she is ready for more self-help work.
5. This writer also discussed the use of the play aways (a mp3 audiobook on coping skills) while in the waiting room which IM SOUTH seemed agreeable to. Due to the current COVID-19 pandemic and the modified movement schedule, this cannot be implemented right away, but will be used as soon as possible.
6. This writer also discussed the option of the Stages program, as discussed before.

Suicide Watch: A suicide watch is not warranted at this time

Completed by Bell, A. Psy.D. on 03/18/2020 14:58

**Bureau of Prisons
Psychology Services******SENSITIVE BUT UNCLASSIFIED******Administrative Contact with an Inmate**

Inmate Name:	SOUTH, JASON ROBERT	Sex:	M	Facility:	FTD	Reg #:	57903-019
Date of Birth:	09/11/1978	Provider:	Bell, A. Psy.D.			Unit Team:	UNIT 1
Date:	03/18/2020 14:18						

Comments

On today's date this writer received an email from IM SOUTH that expressed her concerns regarding her physical health. Specifically the email stated, "And I know your reply is you don't have anything to do with medical and meds and can not help. I don't want a reply anyway. I am stating what is going on on the record in case I lose it." This writer addressed this statement during a contact on this date. This writer reminded IM SOUTH of the available avenues that she could utilize should she have concerns to include cop outs to the specific person or department, attending sick call to request an appointment or speak with health services staff, and grievance forms (BP7, BP8, BP9).

Completed by Bell, A. Psy.D. on 03/19/2020 10:21

Reviewed by Marantz, Stacie PsyD/Chief Psychologist on 03/19/2020 15:14

**Bureau of Prisons
Psychology Services
General Administrative Note**

****SENSITIVE BUT UNCLASSIFIED****

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M Facility: FTD	Unit Team: UNIT 1
Date: 03/13/2020 15:39	Provider: Mills, C. Psy.D.	

Comments

At approximately 3:10 p.m. on today's date, inmate SOUTH's housing unit officer called Psychology and indicated inmate SOUTH was reporting she was withdrawing from her prescribed pain medication. This author instructed the housing unit officer to contact Health Services regarding this concern. This author spoke with inmate SOUTH over the phone and she denied experiencing any other emergent concerns. It is this author's understanding that inmate SOUTH was then seen by Health Services.

Completed by Mills, C. Psy.D. on 03/16/2020 08:38

Reviewed by Marantz, Stacie PsyD/Chief Psychologist on 03/16/2020 10:33

**Bureau of Prisons
Psychology Services
Suicide Risk Assessment**

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M Facility: FTD	Unit Team: UNIT 1
Date: 03/12/2020 09:51	Provider: Mills, C. Psy.D.	

Type of Housing: General Population
Cell Accommodation: Open Unit

Findings

This assessment and the resulting recommendations are based on the following sources of information:
 Clinical Interview, Inmate Writing, Presentence Report, Psychology Data System, Sentry

Reason for Referral

Inmate SOUTH was referred to this author on 3/12/20 at approximately 7:00 a.m. Specifically, inmate SOUTH sent an email to the Psychology email box which included several provocative statements regarding a possible PREA allegation and suicidal ideation (for full email see current problem section). As such, inmate SOUTH was immediately located by the Operations Lieutenant and constant visual supervision was maintained on inmate SOUTH until this author's arrival to the institution. This interview was completed in a private office in the Psychology department at approximately 8:00 a.m.

Developmental History

According to SRA (dated 5/25/18):

Inmate SOUTH describes his childhood as "traumatic and unstable." He was raised by his mother, as his father was killed in an automobile accident five months prior to his birth. His mother was an alcohol abuser; he stated she never provided a stable home environment, and she ultimately passed away due to "cardiac arrest by withdrawal from alcohol." From age 10 to 14, Inmate SOUTH lived with his mother, who frequently threatened to send him to the foster system due to his behavioral problems. He lived with various friends at age 14, and then in his own apartment beginning at age 15, when he dropped out of high school and began working at Pizza Hut.

Educational History/Cognitive Impairment

According to SRA (dated 5/25/18):

Inmate SOUTH was expelled from fifth grade due to "behavior problems." In sixth grade at a new school, Inmate SOUTH's school requested a psychological evaluation in response to his display of behavioral problems resulting in multiple suspensions. Per the PSI, Inmate SOUTH participated in "stealing, fighting, skipping school and being destructive." The evaluation included the recommendation he be placed in an intensive therapeutic program where he could complete his middle school studies.

After completing middle school by way of the Outdoor Therapeutic Program (OTP), a wilderness immersion program for behaviorally disordered youth, Inmate SOUTH entered high school. He withdrew prior to completion of ninth grade.

Arrest History and Experience of Incarceration

According to SRA (dated 5/25/18):

Inmate SOUTH states he was sexually victimized by a staff member at another federal correctional facility. Documents suggest this information was reported and PREA protocol was followed. Since the alleged incident, Inmate SOUTH has requested treatment for trauma-related illness.

Mental Health History

Inmate SOUTH is currently designated Care 2-MH which is consistent with the DCLF dated 1/14/20.

According to SRA (dated 5/25/18):

The PSI contains the following mental health history: "Records from the Georgia Department of Human Resources (DHR) indicate that in May 1991, at the age of 12, the defendant was referred to Northside Hospital in Atlanta, Georgia, for a psychological evaluation [see "Educational History," above]... An evaluation completed by Debbie Fruedenthal, M.A., and James Mullins, Ph.D., indicates the defendant was 'experiencing numerous difficulties, particularly in the area of conduct disorders, depression, and anxiety.' The defendant was depressed, angry, anxious and acting out his anger with little insight or judgment, often blaming others for his behavior... Shortly after the psychological evaluation was completed, the defendant was admitted to an inpatient treatment program at Northside Hospital after he expressed

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suicidal ideation and began cutting and carving on his arm. The defendant attributed his behavior to being suspended from school again and feeling that his friends were angry at him. The defendant was diagnosed with 'Major Depression and Conduct Disorder' (DSM III). The defendant was placed on antidepressant medication to alleviate some of his depression and decrease mood swings... A psychoeducational report from the Fulton County, Georgia School System, dated August 1991, indicates the defendant was referred for an evaluation to determine his eligibility for placement in the Behavior Disorders Program. The defendant was described as inattentive during group discussion and having trouble maintaining concentration and completing assignments. It was also noted that the defendant was often involved in verbal and physical altercations with his peers, and often responded in a defiant manner when confronted regarding his behavior. The defendant's intellectual functioning was found to be in the high-average concentration with a Full Scale IQ of 115; however, a significant discrepancy was observed between the defendant's verbal and performance IQ's, suggesting that while the defendant has superior intellectual potential, he has difficulty demonstrating this in the verbal expressive modality... The defendant self-reported trouble controlling his temper and complying with class structure and routine. The defendant also reported being argumentative with his peers. Contact with the defendant's private psychologist indicated the defendant recently completed social/emotional testing and there was evidence of depression and conduct difficulties... The defendant denied any history of psychosis, including auditory or visual hallucinations, or recent suicidal ideation. The defendant attributed his mental/emotional problems during adolescence to his mother being an alcoholic... The defendant is currently being treated for anxiety..."

While in the BOP, Inmate SOUTH has been housed at seven institutions, and had nearly 150 contacts with mental health services per his request. He has previously been diagnosed with panic disorder, agoraphobia, panic disorder without agoraphobia, depressive disorder NOS, major depressive disorder, antisocial personality disorder, and personality disorder. His medication history includes Xanax, Celexa and Zoloft.

Regarding treatment programs, Inmate SOUTH completed Drug Education in 2009, was expelled from Challenge in 2010 (see note 12/20/2010), expelled from NR DAP in 2011, withdrew from Mindfulness Based Cognitive Therapy in 2013, and was withdrawn from Anger Management in 2017 (did not present with ID and failed to make the move).. Treatment summaries and individual therapy records indicate several maladaptive patterns of behavior including, "avoidance of responsibility," blaming others, "entitlement issues" and demandingness. The Challenge expulsion note (2010) indicated that he was proactive in getting needs met and he demonstrated coping skills to utilize when experiencing unpleasant emotions. The clinician surmised that he had "minimal change - he continues to accept responsibility for his behaviors, has involvement in criminal activity, struggles with being open-minded, humility, accepting negative feedback, and has entitlement issues." He was FRP refuse and was non-compliant with treatment. The NR DAP expulsion note (2011) indicated that he had "limited insight, mollification, absences and less committed compared to peers." He was ultimately coded as NR FAIL due to non-compliance.

In individual therapy, records show clinicians have worked with Inmate SOUTH using cognitive behavioral modes of treatment. CBT based coping skills, anxiety and anger management, and DBT skills (reality acceptance and distress tolerance) were taught. PDS records show he appeared to intermittently benefit from treatment, as well as patterns of non-compliance with assigned homework/ treatment interventions, inability or unwillingness to apply acquired skills, repeated cop-outs expressing the need for services followed by a dissatisfaction with services offered or perceived needs not being met and missed appointments.

In June 2017, Inmate SOUTH first requested institutional transfer to FCI Danbury to participate in the Resolve Program. A referral was formally made by FCI Phoenix to FCI Danbury. Between 07-03-2017 and 08-30-2017 while awaiting response, he submitted 32 cop outs inquiring as to the status of this referral. He was advised he had been denied program transfer by FCI Danbury on 08-30-2017; the following day, he submitted an additional cop out stating he had contacted an attorney and no longer wished to receive psychological services at this facility.

In January 2018, however, Inmate SOUTH submitted a cop out requesting to be seen for treatment again. He was assigned to a new provider (this writer), and in the last four months has been seen for five clinical contacts. After the third of these five contacts, he was provided a psychotropic medication referral, as well as psychoeducation that despite evidence-based treatment interventions his severe symptoms were not improving. He failed to attend the appointment. One month later he returned endorsing still worsening symptoms; he was again referred to Health Services for an

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 Unit Team: UNIT 1

evaluation. Upon being seen, he declined to initiate a medication regimen, instead stating he wanted an MRI to "rule out anything medical." The physician informed him findings of an MRI would not change his recommendations regarding psychotropic medication, but the inmate again declined.

In February 2018, Inmate SOUTH requested to be reconsidered for FCI Danbury's Resolve Program. The Resolve Coordinator and Chief Psychologist again advised FCI Phoenix Inmate SOUTH would not be transferred for that program at that time. In April 2018, he filed a BP-8 stating he had been "wrongfully denied" treatment. He was advised of the rationale and provided ample treatment options at his local institution. In May 2018, he submitted a BP-9, reiterating "wrongful denial" of treatment and requesting to be provided the rationale in writing. He was again provided comprehensive rational after consultation with the denying institution and Central Office, as well as an abundance of treatment options available to him at this facility. He was again referred to sick call to discuss medical interventions for symptom management, and again failed to report. When he presented to Psychology Services today for a scheduled clinical contact, he described his symptoms as continuing to worsen in severity and intensity, and expressed a sense of helplessness to improve his circumstances.

Self-Harm History

According to SRA (dated 5/25/18):

Inmate SOUTH had a remote history of suicidal ideation and suicidal gestures during his teenage years which was documented in his PSR; however, prior to his statement today, he has not demonstrated any suicidal ideation or behaviors in adulthood and since incarceration.

Substance Abuse History

According to SRA (dated 5/25/18):

Per his report today, and substantiated by his PSI, Inmate SOUTH has a substantial history of marijuana and alcohol use, beginning at age 13 until the time of his arrest for the instant offense. He denied a history of stimulant use, stating he used cocaine "a couple of times," but learned he only likes "downers."

Medical Concerns

According to SRA (dated 5/25/18):

In March 2019, Inmate SOUTH reported he was "hit in the head" with a "mallet" by an officer conducted bar taps in the unit. The inmate stated he was asleep in his bunk when the incident occurred, and stated he was unsure whether it was done intentionally. He stated subsequent to this incident he "saw some stars" and began experiencing dizziness, weakness, blurry vision, headaches, feeling "woozy," "heavy eyes, like if you had your eyes crossed for too long" and posterior cervical pain. An evaluation was ordered to rule out intracerebral trauma. Findings of that evaluation, including a CT scan of head and cervical spine, were returned with negative results.

Current Problem

On 3/11/20 at approximately 11:35 p.m., inmate SOUTH sent the following email to the Psychology email inbox. The email was not discovered by Psychology staff until their arrival to the institution on 3/12/20 at approximately 7:00 a.m.

"its just not going to work here, its not any of you , everyone has been supportive and kind , but nothing to help me at the end of the day I am still forced to be myself and live as a woman in a mens prison and subject to sexual harrassment daily and in time an assault, every facility so far I am been NUMEROUS times each.

I dont have to live like this and I will not continue to, none of you are hearing that and Danbury ignored it to and look what happened to me.Im sick of being in fear, no one should live like this. And I am not living in the SHU and if any tried to ever put me in the SHU I will hang myself the first 10 minutes , Im not living like that either. You people made me for 75 days after the last assault and I didnt do a thing to be there ."

During the clinical interview, inmate SOUTH reported that the previous night she felt overwhelmed due to several situational and ongoing stressors. Specifically, she described ongoing stress related to transitioning from male to female, changes in hormone levels, physical pain related to a previous assault, and ongoing stress related to receiving "sexual solicitations" from other inmates at FTD (See SAI-V note dated today's date for additional details). Similar to previous contacts with Psychology she described that she typically becomes overwhelmed with emotions in response to stressors and has difficulty regulating her emotions properly (resulting in her email to Psychology).

Regarding suicidal ideation, inmate SOUTH reported that she "always thinks about suicide, sometimes more than

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others" and identified daily suicidal ideation as her baseline. She denied having any current intent or plan for suicide. Specifically, she stated, "I don't want to die though. I don't want to kill myself. I just don't want to be in pain. I don't want to be fucked [sic] with anymore." She clarified by explaining that she is tired of being in "psychological pain" and tired of being "solicited" by other inmates. She admitted that at times she does think about death as a possible "relief" from this pain, but ultimately her desire to live typically outweighs any suicidal ideation she may experience, and that most of the time she just experiences a desire to not experience pain any longer. As a means to further explain herself, inmate SOUTH stated that she once spoke to another Psychology provider about what "relief" would look like to her which is to be, "conscious when I'm happy, but unconscious when I'm in pain." Inmate SOUTH also made several statements evidencing future orientation such as, "I like life and love. I want to explore. I have things I want to do." She identified goals for the future such as transitioning, to experience love, and to be happy. She described being happy as, "being out of prison and traveling." She identified having supportive relationships with family in the community and some staff members at FTD. She also expressed negative beliefs about individuals who commit suicide and stated, "It's such a waste. They could have been saved." When this author asked inmate SOUTH if she personally believed that she needed to be placed on suicide watch she said, "No. I would tell you if anything changed or if I felt I was an immediate danger to myself." This author and inmate SOUTH then discussed her patterned behavior of sending provocative emails (like the one noted above) discussing suicide and PREA and this author advised inmate SOUTH against doing so after hours. Specifically, this author explained that if inmate SOUTH is really feeling in danger of harming herself that an email is not appropriate and that after hours she needs to contact a staff member or Lieutenant for her safety. Inmate SOUTH indicated she understood and agreed to do so in the future.

Regarding the suicidal statements she made in her email regarding placement in SHU, inmate SOUTH stated, "I don't have any intention of killing myself. I just know I don't do well in SHU and I'm worried they are going to put me in SHU because of these allegations [referring to PREA allegations]." Inmate SOUTH continued to adamantly deny having any intent or plan for suicide while on the compound. This author explained to inmate SOUTH that placement in SHU after reporting a PREA allegation is not guaranteed and that when it is done, it is usually to ensure the safety of that individual. Inmate SOUTH indicated she understood and explained that she would feel less safe in SHU, both because she believes she would be more likely to hurt herself and because she would be in "close quarters" with a male inmate and would not have privacy when changing, using the restroom, etc. Inmate SOUTH's safety concerns for SHU were discussed both with the Chief Psychologist and the PREA compliance manager and recommended to SIS staff that if appropriate, placement in SHU was not recommended given her safety concerns.

Lastly, upon completion of this interview, inmate SOUTH further demonstrated a willingness to engage in treatment by discussing DBT treatment with this author. Specifically, this author and inmate SOUTH discussed the Biosocial Theory of DBT in order to give inmate SOUTH further insight toward her behavior and feelings. This author and inmate SOUTH also discussed several coping skills such as diaphragmatic breathing and journaling. Inmate SOUTH expressed a willingness to utilize these coping skills in response to distress.

Current Mental Status

Level of Consciousness: Alert and Oriented

Psychomotor Activity: Normal

General Appearance: Normal

Behavior: Cooperative

Mood: Appropriate to Content

Thought Process: Goal Directed

Thought Content: Normal

Risk and Protective Factors Assessed

This writer screened the inmate for a variety of empirically validated factors commonly associated with risk for self-harm and suicide.

The following **STATIC** risk factors were assessed to be present and increase the inmate's risk for engaging in suicide related behaviors: History of childhood abuse (physical or sexual), History of inpatient psychiatric treatment, History of mental illness, History of self-injury or suicide attempt, History of violent behavior

Inmate Name:	SOUTH, JASON ROBERT			Reg #:	57903-019
Date of Birth:	09/11/1978	Sex:	M	Facility:	FTD
Date:	03/12/2020 09:51	Provider:	Mills, C. Psy.D.	Unit Team:	UNIT 1

The following **DYNAMIC** risk factors were assessed to be present and increase the inmate's risk for engaging in suicide related behaviors: Current physical pain, Current suicidal ideation, Fear for own safety, Problem solving deficits

The following **PROTECTIVE** factors were assessed to be present and may decrease the inmate's risk of suicide: Able to identify reasons to live, Future orientation, Social support in the institution, Supportive family relationships, View of death as negative, Willingness to engage in treatment

Regarding static risk factors for suicide, inmate SOUTH has a history of childhood abuse, mental illness, psychiatric hospitalization, suicide attempts, and violent behavior.

Regarding dynamic risk factors for suicide, inmate SOUTH endorsed current physical pain related to a previous assault. She also reported distress because she recently learned her pain medication prescription has expired. Inmate SOUTH also reported experiencing daily suicidal ideation and indicated this is consistent with her baseline. As stated above, inmate SOUTH adamantly denied having any current intent or plan for suicide. She explained that she typically does not have a desire to die, but rather no longer desires to be in pain. She admitted that at times she does think about death as a possible "relief" from this pain, but ultimately her desire to live typically outweighs any suicidal ideation she may experience, and that most of the time she just experiences a desire to not experience pain any longer. Inmate SOUTH also reported a fear for her safety. Specifically, she reported fearing for her safety on the compound due to "sexual solicitations" from other inmates and also concerns for her safety should she ultimately be placed in SHU. These safety concerns were relayed to the Chief Psychologist, PREA Compliance Manager, and SIS. Lastly, inmate SOUTH's pattern of endorsing suicidal ideation in response to stressors evidences a problem solving deficit.

Regarding protective factors against suicide, inmate SOUTH adamantly denied having any current/recent intent or plan for suicide. She also adamantly denied having a desire to die and reported she wants to live. Specifically, she stated, "I don't want to die though. I don't want to kill myself. I just don't want to be in pain. I don't want to be fucked [sic] with anymore." Inmate SOUTH also made several statements evidencing future orientation such as, "I like life and love. I want to explore. I have things I want to do." She identified goals for the future such as transitioning, to experience love, and to be happy. She described being happy as, "being out of prison and traveling." She identified having supportive relationships with family in the community and some staff members at FTD. She also expressed negative beliefs about individuals who commit suicide and stated, "It's such a waste. They could have been saved." Inmate SOUTH also demonstrated a willingness to engage in treatment through her openness and participation in the above stated DBT interventions on today's date. In addition to her willingness to come to Psychology and other institution staff should she experience any increase in her intent to harm herself in the future.

Although there are some risk factors present, the totality of risk and protective factors considered currently places inmate SOUTH at low-risk for suicide.

Diagnosis

Alcohol Use Disorder: Severe, F10.20*b - Current
 Bipolar I Disorder: Current or Most Recent Episode Depressed: Severe, F31.4 - Current
 Cannabis Use Disorder, Severe, F12.20*b - Current
 Gender Dysphoria In Adolescents And Adults, F64.1 - Current
 Posttraumatic Stress Disorder, F43.10 - Current
 Borderline Personality Disorder, F60.3 - Current
 Other Specified Personality Disorder, F60.89 - Current

Conclusions

The Overall Acute Suicide Risk for this Inmate is: Low
 Overall Chronic Suicide Risk for this Inmate is: Absent

Recommendations

Inmate SOUTH was evaluated for suicide risk after she sent an email to the Psychology email box which included suicidal statements. Inmate SOUTH sent this email on 3/11/2020 at approximately 11:35 p.m. The email was not discovered by Psychology staff until their arrival to the institution on 3/12/2020 at 7:00 a.m. Upon discovery, inmate SOUTH was immediately located by custody staff and under constant visual supervision until the arrival of this author. After consideration of the

Inmate Name: SOUTH, JASON ROBERT
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 Unit Team: UNIT 1

information gathered, the protective factors against suicide detailed above outweigh any risk factors present. Specifically, although inmate SOUTH endorsed daily suicidal ideation, she described this as being consistent with her baseline functioning and adamantly denied having any intent or plan for suicide. Inmate SOUTH adamantly denied having a desire to die and reported a desire to live. Specifically, she reported that she typically only experiences a desire to not be in pain any more and that although she sometimes thinks about dying as a means to not be in pain, her desire to live typically outweighs any desire to die. Inmate SOUTH presented as future oriented and identified several goals for the future such as, transitioning, engaging in treatment, and releasing to the community. She reported having supportive familial relationships and with staff at FTD. She also expressed negative beliefs about those who commit suicide stating, "It makes me sad. It's such a waste. They could have been saved." Lastly, inmate SOUTH demonstrated a willingness to participate in treatment evidenced by her participation in interventions today and her willingness to come to Psychology and/or other institution staff should she experience an increase in her intent for suicide in the future. Overall, after consideration of the information gathered, and in consultation with the Chief psychologist, placement on Suicide Watch was not recommended.

Recommendations:

Inmate SOUTH will continue to be engaged in treatment on at least a monthly basis in accordance with Care 2-MH policy. Frequency of these contacts may increase due to presenting problems, symptoms, and/or clinician's judgment. During her monthly contacts the following interventions from her treatment plan will be addressed:

- Complete Basic Cognitive Skills
- Use RSAs to effectively manage mood and anxiety symptoms
- Learn and review DBT skills

Additionally:

- 1) Inmate SOUTH will be referred to Health Services and SIS staff regarding the above noted PREA allegation (See SAI-V note dated today's date)
- 2) Inmate SOUTH's safety concerns will be relayed to the Chief Psychologist, PREA Compliance Manager, and SIS staff
- 3) Inmate SOUTH was instructed to attend sick call in order to address her physical pain concerns
- 4) This author will update inmate SOUTH's primary treatment provider regarding the inmate's current functioning

Suicide Watch: A suicide watch is not warranted at this time

Completed by Mills, C. Psy.D. on 03/12/2020 11:53

**Bureau of Prisons
Psychology Services**

SENSITIVE BUT UNCLASSIFIED

Clinical Intervention - Clinical Contact

Inmate Name: SOUTH, JASON ROBERT		Reg #: 57903-019
Date of Birth: 09/11/1978	Sex: M	Unit Team: UNIT 1
Date: 03/11/2020 11:19	Facility: FTD	
	Provider: Marantz, Stacie PsyD/Chief	

Focus of Session

This writer met with IM SOUTH at her request. She had several questions and concerns she wanted to address. She also stated that she just wanted to meet me since she reports having bad interactions with other Chief Psychologists. This writer explained that I believe in being upfront and will provide information as straight forward as possible. She indicated she appreciated that. She discussed her disappointment and frustration regarding her denial for visual searches. This writer explained that the policy is written so that the Warden at each institution has the discretion to make those decisions and they can differ as she is transferred. She was told the same was in regards to programming and that not all institutions offer the same programs/groups. She stated she understood.

In regards to her request to be transferred to a female institution, the process was addressed and she was told that it is not decided locally and there are many factors that are taken into consideration. She was told that one factor is her hormone level. She was told the request was provided to the AW over psychology and central office will be notified. She was also told that he can take a long period of time. She asked how long and this writer said it depends but it can be more than a year. Discussed ways she can cope while she is here, including programming (education, recreation), working with psychology, and using appropriate coping skills. She was informed that she can come to the psychology area and sit in the waiting room if she feels overwhelmed.

IM SOUTH discussed that she feels staff here have been very helpful and nice. Discussed maintaining appropriate boundaries and that she needs to remember that the staff are not her friends and it is their job to ensure those boundaries are kept. She admitted that she did feel hurt and took it personally recently when her unit team staff did that to her. Discussed ways she can cope with that and remind herself not to take things personally.

She also explained that she feels her emotions are changing quickly, and that she finds that she can be easily irritated or cries more often. This writer reminded her that she is taking hormones and that her levels are changing and that is a likely cause of this. She acknowledged this could be having an impact.

Ms. South told this writer that she wanted to be upfront and that she plans on advocating for her rights. This writer encouraged her to do this, but to remember to follow the appropriate chain of command while doing so. She was also reminded that she will need to focus on staying in control of her emotions as she may be faced with negative responses along the way. She stated she understood.

She indicated that she will continue to work with psychology and her unit team. Ms. South's feelings were validated throughout the session.

Subjective/Objective Presentation

IM SOUTH presented as alert and oriented in all spheres. IM 's mood appeared neutral and affect was congruent. IM SOUTH maintained good eye contact and her rate and tone of speech were within normal limits. There was no evidence of thought or perceptual disturbances at this time.

Intervention(s)

Supportive counseling was provided. Information was given regarding some of her questions and concerns. Discussed the coping technique of picturing a good memory and going through the five senses to bring her to the good memory and away from the present. She agreed to try this and stated she loves the beach. She was encouraged to use this, especially when she feels overwhelmed or stressed.

Progress/Plan

No follow up with this writer is necessary unless requested.

Completed by Marantz, Stacie PsyD/Chief Psychologist on 03/11/2020 12:28

Bureau of Prisons
Psychology Services
Clinical Intervention - Clinical Contact

SENSITIVE BUT UNCLASSIFIED

Inmate Name: SOUTH, JASON ROBERT	Sex: M	Facility: FTD	Reg #: 57903-019
Date of Birth: 09/11/1978	Provider: Postorino, L. PsyD, Staff	Unit Team: UNIT 1	
Date: 03/10/2020 15:21			

Focus of Session

IM South was seen today after staff discovered she sent a concerning email to an outside legal advocate. IM South reported feeling frustrated by what she perceives as the lack of progress in her transition to female. She reported feeling further upset by her perception that staff are giving her inconsistent or inaccurate information about the process. When challenged, she admitted that staff are likely adhering to policy/best practice guidelines and that she is also familiar with the BOP transgender policy, which should answer a lot of her questions.

Subjective/Objective Presentation

IM South presented as alert and oriented to all spheres. Her mood was mildly frustrated with broad affect. She was calm and appropriate despite her stated frustrations. Her speech was clear, coherent, and goal-directed, exhibiting normal rate and rhythm. Her thoughts were organized and lucid, with no apparent delusional content. Psychotic symptomatology was not reported or observed. She denied any suicidal/homicidal ideation or intent.

Intervention(s)

Ultimately it appears that IM South is upset that the transition is not happening as quickly as she would like, which she was able to recognize is a reflection of her typical impulsivity. Psychoeducation was given on her diagnoses (specifically, Borderline Personality Disorder) as a means of normalizing the turbulent emotions she often experiences and to emphasize the need to be patient with herself. She identified various coping skills, mostly grounding skills, which she uses regularly. She was also encouraged to direct her transgender-related questions/concerns to the AW who oversees these matters.

Progress/Plan

IM South is a CARE2-MH inmate. She will continue to be engaged in treatment activities related to her treatment plan on at least a monthly basis in accordance with CARE2-MH policy. Frequency may increase due to presenting problems, symptoms, and/or clinician's judgment. She was reminded of the ways to contact Psychology Services in the event of an emergency.

Completed by Postorino, L. PsyD, Staff Psychologist on 03/12/2020 13:36